

Wisconsin Department of Corrections

Governor Scott Walker | Secretary Jon E. Litscher

Office of Detention Facilities

April 30, 2018

Sheriff Rob Hermann Manitowoc County Sheriff's Department 1025 South 9th Street Manitowoc, WI 54220

RE: 2018 Annual Inspection Manitowoc County Jail

Dear Sheriff Hermann:

On April 11th, 2018 the annual inspection of the Manitowoc County Jail was conducted pursuant to Wisconsin State Statute 301.37(3). The inspection compared your facility and its operation to applicable state statutes and Department of Corrections Administrative Rule Chapter DOC 350. This report will summarize the findings of the inspection, including the progress made following the 2017 inspection, any current initiatives and any statute or administrative code violations.

On the date of the inspection there were 186 inmates housed within the facility, of that total there were 2 ES Sanction inmates. There were also 11 inmates assigned to the Electronic Monitoring Program and 0 inmates housed in other counties as Safekeepers due to lack of bed space.

Summary of Progress & Initiatives

Operational changes and improvements:

- ❖ New Jail Administrator Joy Brixius
- ❖ New Lt of Corrections Randy Johnson
- ❖ Body Scanner is operational
- ❖ Added programming 6 week addiction class
- ❖ Pathways Recover coaches- now receiving free calls
- ❖ Volunteer Orientation has been revised with additional changes pending
- New Mattresses
- Drug Court has been implemented
- Corrections Division is now overseeing the inmate worker program
- Video Visitation has been implemented

Initiatives:

- ✓ Review of current inmate discipline process
- ✓ Review of all Policies and Procedures for all sections of Jail Operations
- ✓ Shower project- continuation
- ✓ Expand LTC programming
- ✓ Implemented new packets for incoming sentenced inmates
- ✓ Revision of current EMP
- ✓ Station for DNA in Lobby
- ✓ 1st floor food cart replacement
- ✓ Revision of Corrections Division training cycle and components
- ✓ Review all jail programming
- ✓ Review SCBA training process
- ✓ Continue the review of Electronic Medical Records system

Programming

The following programs are offered to the inmates in Manitowoc County:

- Lutheran Social Services:
 - o Anger management
 - Life Skills
- Pathways
 - o 6 week Addiction class
- Lakeshore Technical College
 - o Parenting Skills
 - o HSED/GED
 - o Employability Skills
 - Financial Literacy
 - Adult Basic Education
- AA & NA
- Religious programming consists of full church programs 3 x week and individual programs.
 - o This includes Spanish Service on Mondays and occasional confession availability.

Administrative Code Violations

Administrative Code DOC 350.19 (4) Fire safety evacuation and other procedures shall be practiced or simulated by all jail staff at least once every 12 months. Each practice or simulation shall be documented. ~This training was not completed in 2017.

Recommendations

- > **Staffing-** Review of overall staffing needs coupled with facility operational needs should be done. ~ *Repeat from previous inspection periods*.
- > Space Needs- Continued review of housing needs should be completed. Inmates are periodically being housed out of county due to lack of sufficient housing availability. ~Repeat from previous inspection periods
- ➤ Policy and Procedures- are in need of revision to incorporate current DOC 350 Administrative Code sections and numbering. ~Repeat from previous inspection periods.
- ➤ **Training** Review of the Corrections Division training cycle and components should be completed to ensure all required areas are met and the overall continuing education meets expectations of the department.
- ➤ Medical Space- Review of the current medical space utilized should be completed. With regard to DOC 350.14 Inmate Health Care, it has been identified that the current space being utilized for services is not meeting the current facility need.

Please extend my gratitude to Deputy Inspector Joy Brixius and the remainder of the staff for their professionalism and for accommodating my inspection. Deputy Inspector Brixius has indicated a strong desire to review all areas of recommendation and is currently formulating internal action plans for review and completion of identified areas. On the date of the inspection I noted a clear sense of positive inmate climate coupled with an overall staffing focus on operational needs.

The Manitowoc County Jail is approved by the Department of Corrections for the detention of adult offenders with a maximum capacity of 199. This facility is not approved for the detention of Juveniles.

This approval is contingent on the correction of any violations that may have been identified in this report and continuing compliance with all applicable Wisconsin State Statutes and administrative codes. If you have any questions, or if I can assist you in any manner, please feel free to contact me.

Sincerely,

Nancy Thelen, Northeastern Region DOC-Office of Detention Facilities

Cc: Deputy Inspector Joy Brixius, Jail Administrator

Kristi Dietz, Director ODF

Regional file

Mancy Thelen

CHAPTER DOC 350 INSPECTION DOCUMENT

| COUN | ITY: Manitowoc County | | | DA | ATE: April 11, 2018 |
|-----------------------------------|--|--------------------------------|--|-------------------------------|--|
| | | INM | ATE HOUSING AND CLASSIFICA | 10IT | N |
| | | | or substantially remodeled on or after S | epter | mber 1, 2014, double cells shall have a |
| floor a | rea of at least 25 square feet of un | encur | nbered space per occupant. | | |
| COMPI | LIANCE | VE | RIFICATION | | |
| | Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| | Needs improvement | | Sample of facility records reviewed | | Other (specify): |
| | Non-compliant | | Sight confirmation by inspector | | |
| | Not reviewed | | Verbal confirmation by facility staff | | |
| Comme | ents: NA | | | | |
| | | | | | |
| double | occupancy, a cell shall have a flo | or are | a of at least 70 square feet. NOTE: ODF | reco | |
| | • | | 1990, a cell shall have a floor area of at le | ast 5 | 4 square feet. |
| | LIANCE | VE | RIFICATION | | |
| $\underline{\underline{\square}}$ | Meets standard | | Policy and procedure manual review | $\underline{\hspace{0.1cm}}$ | |
| | Needs improvement | <u> </u> _ | Sample of facility records reviewed | | Other (specify): |
| | Non-compliant | | Sight confirmation by inspector | | |
| | Not reviewed | L | Verbal confirmation by facility staff | | |
| Comme | ents: There are currently 80 bu | INS II | True raciity. | | |
| DOC 36 that are joint depart | 05.20 (1) The county board and she required to ensure the health, sa etermination shall be in writing and ment. The written joint determinate board and sheriff. Unless there is | eriff s fety a d sign | nd security of the jail staff and inmates w | ng no hen board ende | eeds, including support staff and services using cells for double occupancy. The I and the sheriff and shall be filed with the ed by mutual written agreement of the |
| The wr | The County Board and Sheriff agre The staffing levels include security The staffing pattern is detailed in the | ee to the staff, ne writ | health care staff, support and service staff a | | |
| COMPI | LIANCE | VE | RIFICATION | | |
| | Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| | Needs improvement | | Sample of facility records reviewed | | Other (specify): |
| | Non-compliant | | Sight confirmation by inspector | | |
| 一百 | Not reviewed | $\overline{\mathbb{X}}$ | Verbal confirmation by facility staff | | |
| Comme | ents: The staffing agreement or | n file | was completed 12/19/2017. As the | facil | ity experiences changes in inmate |
| | | | hould continue to be reviewed. | iuoii | ny experiences changes in limate |

Office of Detention Facilities DOC-2744 (4/2015)

| DOC 350.20 (2) Inmates housed in the same cell shall have the same custody classification and be properly segregated as required under s. 302.36, Stats. | | | | | | |
|---|---|--|-------------|---|-----|--|
| CO | MPLI | ANCE \ | /EF | RIFICATION | | |
| | \boxtimes | Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| | | Needs improvement | \boxtimes | Sample of facility records reviewed | | Other (specify): |
| | | Non-compliant | | Sight confirmation by inspector | | |
| | | Not reviewed | \boxtimes | Verbal confirmation by facility staff | | |
| | Comments: Spot review on the date of the inspection showed compliance in this area. | | | | | |
| | | 0.20 (3) For male and female housin maintained for single occupancy. | g a | reas, at least one cell or 15% of the jail's to | tal | number of cells, whichever is greater, |
| CO | MPLI | ANCE \ | /EF | RIFICATION | | |
| | X | Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| [| | Needs improvement | | Sample of facility records reviewed | | Other (specify): |
| [| | Non-compliant | | Sight confirmation by inspector | | |
| [| | Not reviewed | \boxtimes | Verbal confirmation by facility staff | | |
| | | nts: Facility design allows for cor | | | | |
| | | 0.20 (4) Receiving cells may not be | | | | |
| | | ANCE \ | /EF | RIFICATION | | |
| | | Meets standard | Ш | Policy and procedure manual review | | Previous compliance documented |
| | | Needs improvement | Щ | Sample of facility records reviewed | | Other (specify): |
| | | Non-compliant | \boxtimes | Sight confirmation by inspector | | |
| | | Not reviewed | \boxtimes | Verbal confirmation by facility staff | | |
| Con | nmer | nts: Spot review on the date of th | ne i | nspection showed compliance in this | are | ea. |
| DOC 350.21 Inmate classification. All jails shall meet the requirements set forth in s. 302.36 Stats. The sheriff shall establish and maintain an objective prisoner classification system to determine prisoner custody status and housing assignment, and develop eligibility criteria for prisoner participation in available work assignments, programs and community service projects. The jail shall have policies and procedures relating to classification. DOC 350.21 (1) Description of the objective prisoner classification system, including the identification and training of staff authorized to classify prisoners, initial classification and reclassification procedures and prisoner appeal process. DOC 350.21 (2) Eligibility criteria for prisoner participation in available work assignments, programs and community service projects. DOC 350.21 (3) Review of prisoner classification decisions. The jail has implemented an objective classification system based on point additive formula or decision tree forced choice or similar formalized mechanism for housing determination. A written policy is provided to all correctional staff detailing classification process. Policy clearly identifies personnel authorized to classify inmate housing assignments. Personnel assigned to complete inmate classification assignment receive formal training. A process is in place for supervising personnel to complete a secondary review of reclassification and appeals. Sufficient housing exists to meet classification guidelines to male and female inmates. | | | | | | |
| COI | Inmates housed in the same cell shall have the same security classification and be properly segregated as required in s. 302.36 Stats. COMPLIANCE VERIFICATION | | | | | |
| | X | Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| | | Needs improvement | \boxtimes | Sample of facility records reviewed | | Other (specify): |
| [| | Non-compliant | | Sight confirmation by inspector | | |
| [| | Not reviewed | \boxtimes | Verbal confirmation by facility staff | | |
| Inn pla | Comments: Policy & Procedure #102 Classification and Segregation: Inmates were properly segregated on the day of the inspection. Objective classification practices are currently in place using a decision tree model. Face to face interviews are being done, and reclassification is occurring | | | | | |
| app | approximately every 30 days or as needed. Jail Administration reports that the current process in place is going well. | | | | | arrent process in place is going well. |

DOC-2744 (4/2015)

They continue to complete reviews of the process to ensure objectives are being met. There are currently 5 officers who complete this function under the direction of Correctional Sergeant Ott.

SAFETY AND SECURITY PRACTICES

DOC 350.18 Security. The jail shall have policies and procedures relating to jail security.

- Portable communications and alarm systems are in good working condition
- Intercom and emergency notification devices are in good working order

DOC 350.18 (1) Inmate supervision. The jail shall have a system providing for well-being checks of inmates. Policies and procedures shall provide that all inmates are personally observed by jail security staff at staggered intervals not to exceed the following:
(a) 60 minutes (b) 15 minutes for inmates housed on suicide watch.

- All inmates are personally observed during each physical inspection.
- In housing units of multiple cells, officers are encouraged to complete physical inspections from within the housing unit.

DOC 350.18 (2) Supplemental observation. A video monitoring system may be used to supplement but not replace personal observations.

| COMPLIANCE | VERIFICATION | |
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| Meets standard | Policy and procedure manual review | Previous compliance documented |
| Needs improvement | Sample of facility records reviewed | Other (specify): |
| Non-compliant | Sight confirmation by inspector | |
| Not reviewed | Verbal confirmation by facility staff | |
| Comments: Policy & Procedure # | # 103.08 Cellblock Security Checks: | |
| Security Check logs reviewed s | showed improvement from the previous insp | ection period. Activities were included into |
| | n with regard to climate and mood within the | |
| DOC 350.18 (4) Inmate counts. De | scription of the system for physically counting inn | nates. Formal counts shall be completed and |
| documented at least three times pe | r day, with a minimum of one count per shift. | |
| COMPLIANCE | VERIFICATION | |
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| Needs improvement | Sample of facility records reviewed | Other (specify): |
| | Cight confirmation by incorporator | |
| Non-compliant | Sight confirmation by inspector | |
| Non-compliant Not reviewed | Verbal confirmation by facility staff | |
| Not reviewed | | the JMS. |
| Not reviewed | Verbal confirmation by facility staff | the JMS. |
| Not reviewed Comments: Formal standing cou | Verbal confirmation by facility staff | |
| Not reviewed Comments: Formal standing cou DOC 350.18 (5) Security inspection | Verbal confirmation by facility staff nts are done 4 times per day and logged on ns. Descriptions of procedures for conducting and | |
| Not reviewed Comments: Formal standing cou DOC 350.18 (5) Security inspection Facility and area searches a | Verbal confirmation by facility staff nts are done 4 times per day and logged on ns. Descriptions of procedures for conducting and re completed and documented. | |
| Not reviewed Comments: Formal standing cou DOC 350.18 (5) Security inspection Facility and area searches a COMPLIANCE | Verbal confirmation by facility staff nts are done 4 times per day and logged on ns. Descriptions of procedures for conducting and re completed and documented. VERIFICATION | d documenting facility and area searches. |
| Not reviewed Comments: Formal standing cou DOC 350.18 (5) Security inspection Facility and area searches a | Verbal confirmation by facility staff nts are done 4 times per day and logged on ns. Descriptions of procedures for conducting and re completed and documented. VERIFICATION Policy and procedure manual review | |
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| Not reviewed Comments: Formal standing cou DOC 350.18 (5) Security inspection Facility and area searches a COMPLIANCE Meets standard Needs improvement Non-compliant Not reviewed Comments: This is an area that is been created. DOC 350.18 (6) Inmate searches. If | Verbal confirmation by facility staff Ints are done 4 times per day and logged on Ins. Descriptions of procedures for conducting and Ins. Descriptions of procedures for conducting and procedure for c | Previous compliance documented Other (specify): sed- Newly revised shakedown forms have |
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| | | | nthly inspections shall be made to determiking order. Each inspection shall be docu | | if all jail doors and locks within and to the nted. |
|--------------------------------|--|---------------------------|---|---------------------|---|
| • | The remote security controls of doors all manufacturing doors, locks and release. The jail staff demonstrate a proficiency | eas | | | |
| COMPL | _IANCE \ | /EF | RIFICATION | | |
| \square | Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| | Needs improvement | $\overline{\boxtimes}$ | Sample of facility records reviewed | | Other (specify): |
| | Non-compliant | | Sight confirmation by inspector | | |
| | Not reviewed | \boxtimes | Verbal confirmation by facility staff | | |
| Comme | ents: Policy & Procedure # 103.14 | : | | | |
| and re | | | monthly basis by staff members who nistration reviews the reports and con | | |
| DOC 3 | 50.18 (8) Key control. Control and us | e c | f jail keys, including all of the following: | | |
| | | ea a | and accessible in the event of an emergency | | |
| COMPL | LIANCE \ | /EF | RIFICATION | | |
| \boxtimes | Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| | Needs improvement | \boxtimes | Sample of facility records reviewed | | Other (specify): |
| | Non-compliant | | Sight confirmation by inspector | | |
| | Not reviewed | \boxtimes | Verbal confirmation by facility staff | | |
| Initial AED. | 50.18 (9) Weapons control. Introduct | po ion | nents. Contol is documented at shift a | nd u | · · · · · · |
| COMPL | IANCE | /C C | RIFICATION | | |
| COMPL | Meets standard | / E r | | $\overline{}$ | Dravious compliance decumented |
| $- \stackrel{\square}{\vdash}$ | | 믬 | Policy and procedure manual review Sample of facility records reviewed | H | Previous compliance documented |
| - H | Needs improvement Non-compliant | $\frac{\square}{\square}$ | Sight confirmation by inspector | | Other (specify): |
| - - | Not reviewed | \overline{X} | Verbal confirmation by facility staff | | |
| Comme | ents: Policy # 103.11 | | verbal committation by facility stan | | |
| DOC 35 the fac | | | roduction, availability, control, inventory, s | tor | age and use of tools and sharps within |
| COMPL | _IANCE \ | /EF | RIFICATION | | |
| \square | Meets standard | П | Policy and procedure manual review | | Previous compliance documented |
| Ħ | Needs improvement | $\overline{\boxtimes}$ | Sample of facility records reviewed | $\overline{\sqcap}$ | Other (specify): |
| 一一 | Non-compliant | Ħ | Sight confirmation by inspector | | 1.1 77 |
| 一百 | Not reviewed | $\overline{\boxtimes}$ | Verbal confirmation by facility staff | | |
| | ents: Policy # 103.12 Spot review | or | the date of the inspection showed co | om | pliance in this area. Reviewed with |

DOC-2744 (4/2015)

DOC 350.19 Fire Safety. The jail shall have policies and procedures relating to fire safety.

DOC 350.19 (2) Each jail shall develop a fire safety policy in accordance with local fire department recommendations that addresses all of the following:

- a) Local fire department inspection requirements under sub. (5).
- b) Fire protection equipment location and maintenance. Each jail shall have and shall properly maintain fire alarms, smoke and thermal detectors, fire extinguishers and self-contained breathing apparatuses which operate for at least 30 minutes.
 - Fire extinguishers are properly maintained with recorded time and date of inspection.
 - Fire extinguishers are properly placed, secured and easily accessible to staff.
 - A fire extinguisher suitable for grease fires is provided in the kitchen.
 - Jail staff can demonstrate proficiency in the use of fire protection equipment.
- c) Training of staff in equipment use and the evacuation of inmates
 - Staff training is documented.

| d) A written evacuation planJail staff can articulate or demonstrate | strate the evacuation routes and policies of the jail. | |
|---|---|--|
| COMPLIANCE | VERIFICATION | |
| Meets standard | Policy and procedure manual review | Previous compliance documented |
| Needs improvement | Sample of facility records reviewed | Other (specify): |
| Non-compliant | Sight confirmation by inspector | |
| Not reviewed | Verbal confirmation by facility staff | |
| Comments: Spot review on the date of t monthly and SCBA's are trained on ar | he inspection showed compliance in this an inually. | rea. Fire extinguishers are checked |
| DOC 350.19 (3) The evacuation route developlace for jail staff in the jail. | oped as part of the evacuation plan under sub. (2 | 2)(d) shall be posted in a conspicuous |
| COMPLIANCE | VERIFICATION | |
| Meets standard | Policy and procedure manual review | Previous compliance documented |
| Needs improvement | Sample of facility records reviewed | Other (specify): |
| Non-compliant | Sight confirmation by inspector | |
| Not reviewed | Verbal confirmation by facility staff | |
| · | he inspection showed compliance in this au other procedures shall be practiced or simulated be documented. | |
| COMPLIANCE | VERIFICATION | |
| Meets standard | Policy and procedure manual review | Previous compliance documented |
| Needs improvement | Sample of facility records reviewed | Other (specify): |
| Non-compliant | Sight confirmation by inspector | - (; |
| Not reviewed | Verbal confirmation by facility staff | |
| Comments: Policy # 103.19 This was re | | |
| maintained. | ted by the local fire department at least once events that the facility conforms to applicable fire safety of | |
| COMPLIANCE | VERIFICATION | |
| Meets standard | Policy and procedure manual review | Previous compliance documented |
| Needs improvement | Sample of facility records reviewed | Other (specify): |
| | | |
| Non-compliant | Sight confirmation by inspector | |
| | Sight confirmation by inspector Verbal confirmation by facility staff | |

| DOC 350.19 (6) There shall be monthly insp Inspections shall be documented. | ect | ions of the facility to ensure compliance wi | ith | safety and fire prevention standards. |
|---|-------------------|--|-------------|---|
| COMPLIANCE | /EF | RIFICATION | | |
| Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| Needs improvement | \boxtimes | Sample of facility records reviewed | | Other (specify): |
| Non-compliant | | Sight confirmation by inspector | | |
| Not reviewed | \boxtimes | Verbal confirmation by facility staff | | |
| Comments: This review includes Dryers, included. | S | CBA and Clutter. Forms have recently | be | een revised to ensure all areas are |
| DOC 350.22 Use of Force. The jail shall have DOC 350.22 (1) Jail staff may use physical for prevent death or bodily injury to the staff may inmate from the jail. Staff may use only the Corporal punishment of inmates is forbidden. | ord emi | e against an inmate only if force is necessor, the inmate or someone else, unlawful o | ary dan | nage to property, or the escape of an |
| | /EF | RIFICATION | | |
| Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| Needs improvement | | Sample of facility records reviewed | | Other (specify): |
| Non-compliant | | Sight confirmation by inspector | | |
| Not reviewed | \boxtimes | Verbal confirmation by facility staff | | |
| Comments: Reviewed with Jail Administ | rati | on. | | |
| DOC 350.22 (2) Any staff member who has administrator or the staff member's supervisubmitted by the end of the shift, unless other supervisory review is conducted as | sor ner\ | describing the incident. The report shall in vise authorized by the sheriff or sheriff's do | ncl | ude all known relevant facts and be |
| | /EF | RIFICATION | | |
| Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| Needs improvement | \boxtimes | Sample of facility records reviewed | | Other (specify): |
| Non-compliant | | Sight confirmation by inspector | | |
| Not reviewed | \boxtimes | Verbal confirmation by facility staff | | |
| Comments: Policy & Procedure #103.04 Reports reviewed on the date of the in- level of force used in recent incidents. review process for discipline is current DOC 350.23 Use of restraints. The jail shall | spe Ad ly b | dministration reviews all incidents alor being reviewed by administration. | ıg v | with the POSC Instructor. The |
| DOC 350.23 (1) Restraint devices are never Inventories are conducted and do DOC 350.23 (2) When an inmate is mechani | us cur | ed as punishment and are not applied longonented. y restrained for non-routine purposes, a w | er t | han necessary. en report must be completed by the end of |
| the shift, unless otherwise authorized by the use and corresponding wellness checks. • Supervisory review is conducted a | | • | sh | all include the reason for use, duration of |
| COMPLIANCE | /EF | RIFICATION | _ | |
| Meets standard | | Policy and procedure manual review | \boxtimes | Previous compliance documented |
| Needs improvement | | Sample of facility records reviewed | | Other (specify): |
| Non-compliant | | Sight confirmation by inspector | _ | |
| Not reviewed | | Verbal confirmation by facility staff | | |
| Comments: Reviewed with Jail Administration | rati | on. | | |

Office of Detention Facilities DOC-2744 (4/2015)

DOC 350.24 Discipline. The jail shall have policies and procedures outlining inmate discipline and due process.

DOC 350.24 (1) Inmates rules of behavior. Every jail shall have written rules of behavior for inmates. At the time of admission, each person shall be notified verbally of the existence of jail rules for inmate behavior and the potential disciplinary actions for violations of the rules. Each inmate shall be provided with a copy of the jail rules or copies of the rules shall be posted in conspicuous places in the jail.

DOC 305.24 (2) Discipline for minor violation. (See code for specific language.)

- (a) A minor discipline is a verbal or written reprimand, restriction of privileges or placement in disciplinary segregation for 24 hours or less.
- (b) Inmate is informed of violation, potential discipline and disciplinary procedures for minor violations.
- (c) Inmate has opportunity to make verbal statement about alleged violation to a staff member
- (d) Staff member may impose a minor discipline if found that violation occurred
- (e) Supervisor is informed of incident by staff member. If supervisor concludes violation is major, then it shall be handled in accordance with Sub. (3). If supervisor finds that no violation occurred, the inmate shall be notified that the charge has been dismissed.
- (f) Inmate is notified of right to appeal and of appeal procedure.
- (g) Information made part of inmate's file. If supervisor finds no violation occurred, the due process records shall reflect those findings.

DOC350.24 (3) Discipline for major violation. (See code for specific language.)

- (a) A major discipline is restriction of privileges for more than 24 hours, placement in solitary confinement for more than 24 hours in accordance with s. 302.40, Stats., loss of good time in accordance with s. 302.43, Stats., restrictions affecting Huber law privileges in accordance s. 303.08, Stats., or restrictions affecting work release in accordance with s. 303.065, Stats.
- (b) Written report to supervisor within 24 hours of incident
- (c) Inmate notification of charges and right to hearing 24 hours in advance of hearing.
- (d) Due process hearing within seven calendar days, unless inmate waives the right to a due process hearing.
 - 1. Impartial hearing officer or committee (not involved in incident)
 - 2. Inmate's right to be present at hearing, make a statement and present evidence. Reason for inmate's absence documented.
 - 3. Inmate's right to present witnesses. Reason for absence of witness documented.
 - 4. Inmate's right to staff advocate if inmate is illiterate or if issues are complex.
 - 5. Hearing officer may consider inmate's mental illness, developmental disability or other emotional or mental disability as a mitigating factor in imposing discipline.
 - 6. Written decision stating discipline administered. Copy to inmate.
 - 7. Inmate is notified of right to appeal and appeal procedure
 - 8. Incident information, discipline administered and decision shall be made part of inmate file. If found no violation occurred, the due process records shall reflect those findings.
- e) If inmate waives right to a due process hearing, violation shall be disposed of in accordance with procedures for minor violations. Major discipline may be imposed if relevant staff member finds a violation occurred. Waiver does not constitute an admission of the alleged violation.

350.24(4) Classification.

(a) An inmate may be evaluated for custody classification following the imposition of discipline.

COMPLIANCE VERIFICATION

Meets standard Policy and procedure manual review Previous compliance documented

Needs improvement Sample of facility records reviewed Other (specify):

Non-compliant Sight confirmation by inspector

Not reviewed Verbal confirmation by facility staff

Comments: Policy & Procedure # 104.00 Discipline:

Rules and process are clearly listed and available. Spot review on the date of the inspection showed compliance in this area.

HEALTH CARE

DOC 350.13 Inmate health screening. The jail shall have policies and procedures for inmate health screening.

DOC 350.13 (1) Use of a health screening form that is developed in conjunction with health care professionals and is used at booking with each inmate to record information about medical, mental health and dental conditions, physical and developmental disabilities, alcohol or other drug abuse problems and suicide risk.

DOC 350.13 (2) Referrals to medical, mental health or supervisory staff in a timely manner in response to identified concerns. If urgent concerns are identified, the referral shall be immediate.

DOC 350.13 (3) Review of the health screening form by health care or other designated staff within 72 hours if non-urgent concerns are identified.

Review by health care provider is conducted and documented.

DOC 350.13 (4) Documentation of health screening results and subsequent review of the health screening form in an inmate's confidential file.

- Health screening forms are legible, accurate and complete, including detailed narratives when necessary.
- Health care professionals provided input into the content of the health screening form.
- The health screening form contains usable information relating to the inmate's medical condition, dental condition, medical disabilities, developmental disabilities, alcohol and other drug abuse and suicide risk.
- A health screening form is completed for each inmate booked into the facility.
- The health screening forms are reviewed for completeness, accuracy, legibility and the appropriateness of the decisions made regarding referral, housing, classification and other actions.
- The identity of the person completing the health screening form is documented.

| COMPLIANCE | VERIFICATION | | | | |
|--|--|--------------------------------|--|--|--|
| Meets standard | Policy and procedure manual review | Previous compliance documented | | | |
| Needs improvement | Sample of facility records reviewed | Other (specify): | | | |
| Non-compliant | Sight confirmation by inspector | | | | |
| Not reviewed | Verbal confirmation by facility staff | | | | |
| Comments: Spot review on the date of the inspection showed compliance in this area. | | | | | |
| | o be completed within 14 days after arrival at the revious 90 days. The health appraisal shall be coble physician. | | | | |
| COMPLIANCE | VERIFICATION | | | | |
| Meets standard | Policy and procedure manual review | Previous compliance documented | | | |
| Needs improvement | Sample of facility records reviewed | Other (specify): | | | |
| Non-compliant | Sight confirmation by inspector | | | | |
| Not reviewed | Verbal confirmation by facility staff | | | | |
| | all inmates. Health care staff acknowledged as reviewed confirmed. A newly revised for | | | | |
| DOC 350.14 Inmate health care. There shall be sufficient equipment, material, space and supplies for the performance of health care services in a confidential manner. | | | | | |
| COMPLIANCE | VERIFICATION | | | | |
| Meets standard | Policy and procedure manual review | Previous compliance documented | | | |
| Needs improvement | Sample of facility records reviewed | Other (specify): | | | |
| Non-compliant | Sight confirmation by inspector | | | | |
| Not reviewed | ∀ Verbal confirmation by facility staff | | | | |
| | Comments: Current space needs for filing is being reviewed. EMR is being considered for future records maintaining. The current space is reportedly becoming difficult to manage, suggestion was made to take a look at any other | | | | |

available space that could be utilized.

Office of Detention Facilities DOC-2744 (4/2015)

| | 350.14 (1) The sheriff shall provide outes in custody. | rsec | cure necessary medical and mental healtr | 1 trea | atment and emergency dental care for | |
|------------------|--|-------------------|--|-------------|--|---|
| | lail provides a specific form for inma | tae t | o request medical assessment or treatment | | | |
| | Jail provides a specific form for inmates to request medical assessment or treatment. All inmate requests for medical care are reviewed by health care staff. | | | | | |
| • | The dispositions of the inmate medic | al re | quests are documented by health care staff | mem | bers. | |
| | IPLIANCE | VEF | RIFICATION | | | |
| \geq | Meets standard | | Policy and procedure manual review | \boxtimes | Previous compliance documented | |
| | Needs improvement | \boxtimes | Sample of facility records reviewed | | Other (specify): | |
| | Non-compliant | | Sight confirmation by inspector | | | |
| | Not reviewed | \boxtimes | Verbal confirmation by facility staff | | | |
| Comi | ments: Spot review on the date of | the | inspection showed compliance in thi | s ar | ea. | |
| | 250 14 (2) Hoolth care stoff shall be | n 00 | mpliance with state and foderal licensure | oort | difference and registration. Varification of | |
| | pliance shall be maintained at the faci | | impliance with state and rederal licensure | cert | dification and registration. Verification of | |
| СОМ | IPLIANCE | VEF | RIFICATION | | | |
| \triangleright | Meets standard | | Policy and procedure manual review | | Previous compliance documented | |
| Ē | Needs improvement | \boxtimes | Sample of facility records reviewed | Ħ | Other (specify): | |
| ┪ | Non-compliant | | Sight confirmation by inspector | | о н.е. (оросну). | |
| F | Not reviewed | X | Verbal confirmation by facility staff | | | |
| Comi | ments: Spot review on the date of | the | inspection showed compliance in thi | s are | ea. | |
| | · | | · · · · · · · · · · · · · · · · · · · | | | |
| | | | separate from other records and shall be | | | |
| acco | realice with S. 146.61 to S. 146.63, Sta | iS., č | and any other applicable state or federal la | aws. | | |
| | Medical record accessibility is limited | l to n | nedical staff, the jail administrator and the ac | dminis | strator's designees as appropriate. | |
| СОМ | IPLIANCE | VEF | RIFICATION | | | |
| \triangleright | | | Policy and procedure manual review | | Previous compliance documented | |
| Ī | Needs improvement | Ħ | Sample of facility records reviewed | Ħ | Other (specify): | |
| Ē | Non-compliant | X | Sight confirmation by inspector | | о н.е. (оросну). | |
| Ē | Not reviewed | \overline{X} | Verbal confirmation by facility staff | | | |
| Comi | ments: Policy & Procedure # 105 1 | 2 5 | Spot review on the date of the inspec | tion | showed compliance in this area. | |
| 001111 | mone. I oney a l'iocodate " l'oc. i | | | , ti O i i | onewed compliance in the area. | |
| | 350.14 (6) Officers shall receive doc | ıme | nted annual training on health care polici | es ar | nd procedures, medications and health | |
| | | ` '= ' | NEIO A TION | | | |
| | IPLIANCE | VEI | RIFICATION | _ | | |
| | | | Policy and procedure manual review | ⊢⊢ | Previous compliance documented | |
| <u> </u> _ | Needs improvement | | Sample of facility records reviewed | | Other (specify): | - |
| <u> </u> _ | Non-compliant | | Sight confirmation by inspector | | | - |
| | Not reviewed | \boxtimes | Verbal confirmation by facility staff | | | |
| Comi | ments: Training was completed in | Mar | ch 2018. | | | |
| DOC | 350.15 Health care policy. The jail st | all h | nave policies and procedures for inmate h | nealth | n care. | İ |
| | course from the periods from on | | | | | |
| DOC | 350.15 (1) Documentation of health r | eferr | als made or health care provided. | | | |
| DOC | 350.15 (2) Maintenance of documents | s in a | an inmate's confidential file. | | | |
| | IPLIANCE | | RIFICATION | | | |
| SOIVI | | _\ | Policy and procedure manual review | | Previous compliance documented | |
| | Needs improvement | \boxtimes | Sample of facility records reviewed | + | • | |
| 누 | Non-compliant | $\overline{\Box}$ | Sight confirmation by inspector | | Other (specify): | |
| - | Not reviewed | X | Verbal confirmation by facility staff | | | |
| | | | · · · · · · · · · · · · · · · · · · · | # 10 | 95 00· | |
| omı | ments, iviedical and nealth Care a | e c | overed under Policy and Procedure | # 10 | 0.00. | |

| | | 50.15 (3) Names, addresses and tele ency and routine health care service | | one numbers of health care providers or age r inmates. | ncies who have agreed to provide |
|----------|----------------|--|---------------------|---|---|
| | | Contact information is available to sta | aff. | | |
| CON | MPL | JANCE | VEF | RIFICATION | |
| | \overline{X} | Meets standard | | Policy and procedure manual review | Previous compliance documented |
| | \exists | Needs improvement | Ħ | Sample of facility records reviewed | Other (specify): |
| Ī | ┪ | Non-compliant | X | Sight confirmation by inspector | _ callet (openity). |
| Ť | ┪ | Not reviewed | \overline{X} | Verbal confirmation by facility staff | |
| Con | nme | | he | inspection showed compliance in this a | ırea. |
| DO | C 35 | 50.15 (4) Referral of an inmate to jail | l hea | alth care staff or to other agencies that provi | de health care. |
| | • | Health care referrals are made and d Staff are knowledgeable about the he | ocui | mented. | |
| CO1 | MPI | JANCE | | RIFICATION | |
| | \overline{X} | Meets standard | V L I | _ | Previous compliance documented |
| <u>k</u> | 4 | | | Policy and procedure manual review Sample of facility records reviewed | |
| | = | Needs improvement Non-compliant | \vdash | Sight confirmation by inspector | Other (specify): |
| <u></u> | ┽ | Not reviewed | X | Verbal confirmation by facility staff | |
| | | | | • • | |
| Con | nme | ents: Spot review on the date of t | ne | inspection showed compliance in this a | area. |
| | | | | cluding the use of an inmate's personal phy | sician. |
| | | LIANCE | VE | RIFICATION | |
| | <u> </u> | Meets standard | Щ | Policy and procedure manual review | Previous compliance documented |
| | 4 | Needs improvement | <u>Ц</u> | Sample of facility records reviewed | Other (specify): |
| | 4 | Non-compliant | | Sight confirmation by inspector | |
| L | | Not reviewed | \times | Verbal confirmation by facility staff | |
| Con | nme | ents: Reviewed with Medical nad | jail | Administration. | |
| DOC | 35 | 50.15 (7) Schedule of inmate access | toı | outine medical care. | |
| | | The schedule of inmate access to me | edica | al care is provided to inmates in writing via hand | book, posted notice, inmate rule and regulation |
| | | list, or other appropriate means. | | | |
| | • | An alternative means for inmates to a | acce | ss medical care is provided if the inmates are u | nable to read or write. |
| CO | MPL | LIANCE | VEF | RIFICATION | |
| | X | Meets standard | | Policy and procedure manual review | Previous compliance documented |
| | | Needs improvement | \boxtimes | Sample of facility records reviewed | Other (specify): |
| | | Non-compliant | | Sight confirmation by inspector | |
| | | Not reviewed | \boxtimes | Verbal confirmation by facility staff | |
| Con | nme | ents: Spot review on the date of t | he | inspection showed compliance in this a | irea. |
| DOC | C 3 | 50.15 (8) Provision for inmates with | chr | onic medical conditions. | |
| CO | MPI | LIANCE | VFF | RIFICATION | |
| | | Meets standard | <u> </u> | Policy and procedure manual review | Previous compliance documented |
| <u>k</u> | 7 | Needs improvement | $\overline{\nabla}$ | Sample of facility records reviewed | Other (specify): |
| | ┪ | Non-compliant | | Sight confirmation by inspector | |
| | ╡ | Not reviewed | \boxtimes | Verbal confirmation by facility staff | |
| L | | | \sim | i i i i i i i i i i i i i i i i i i i | |

Office of Detention Facilities DOC-2744 (4/2015)

Comments: Reviewed with Medical personnel.

| DOC | 350.15 (9) Procedure for processing | inma | ate medical requests on a daily basis. | | |
|---------------------|--|------------------------------|--|----------|--|
| : | | | d on an official medical request form. re retained in inmate's confidential medical file | Э. | |
| COMI | PLIANCE | VEI | RIFICATION | | |
| $\overline{}$ | Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| | Needs improvement | $\overline{\boxtimes}$ | Sample of facility records reviewed | | Other (specify): |
| | Non-compliant | | Sight confirmation by inspector | | |
| | Not reviewed | \boxtimes | Verbal confirmation by facility staff | | |
| Comr | ments: Spot review on the date of | the | inspection showed compliance in this | ar | ea. |
| | ding emergency services. | | e's confidential medical file of any referra | | nd identification of the services provided, |
| COMI | PLIANCE | VEI | RIFICATION | | |
| $\overline{\nabla}$ | | | Policy and procedure manual review | | Previous compliance documented |
| | Needs improvement | $\overline{\nabla}$ | Sample of facility records reviewed | Ħ | Other (specify): |
| | Non-compliant | | Sight confirmation by inspector | | g Carlot (opcony). |
| | Not reviewed | $\overline{\mathbf{X}}$ | Verbal confirmation by facility staff | | |
| Comr | | | inspection showed compliance in this | ar | 202 |
| Com | nents. Spot review on the date of | uie | inspection showed compliance in this | ai | Ga. |
| : | The jail health care providers, food scare professional. | servio | n care professional are documented in the inn be providers, and correctional staff are notified | | |
| | PLIANCE | VEI | RIFICATION | | |
| | Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| | Needs improvement | $\underline{\hspace{0.1cm}}$ | Sample of facility records reviewed | | Other (specify): |
| | Non-compliant | | Sight confirmation by inspector | | |
| | Not reviewed | \boxtimes | Verbal confirmation by facility staff | | |
| Comr | ments: Spot review on the date of | the | inspection showed compliance in this | ar | ea. |
| DOC | 350.15 (12) Pregnancy management | • | | | |
| COMI | PLIANCE | VEI | RIFICATION | | |
| $\overline{}$ | Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| | Needs improvement | Ī | Sample of facility records reviewed | | Other (specify): |
| | Non-compliant | | Sight confirmation by inspector | | |
| | Not reviewed | X | Verbal confirmation by facility staff | | |
| Comr | ments: Reviewed with medical per | rson | nel. | | |
| DOC | 350.15 (13) Maintenance of agreeme | nts b | etween the jail and providers of health car | e s | ervices. |
| COM | PLIANCE | \/⊏! | RIFICATION | | |
| | | VΕI | | | Pravious compliance decumented |
| | | 누 | Policy and procedure manual review Sample of facility records reviewed | \vdash | Previous compliance documented |
| <u> </u> | Needs improvement Non compliant | 늗 | | | Other (specify): |
| _ <u></u> - | Non-compliant Not reviewed | | Sight confirmation by inspector Verbal confirmation by facility staff | | |
| | | | | | adaptation and a second of the |
| | • | | ded by Manitowoc County Sheriff's Do Inmate requests are reviewed by me | | · |

maintained. Medical policies are being updated and are being reviewed at this time. There are currently 3 full-time RN's. Coverage occurs M-F on two shifts (approximately 6a-10:30p) and 6 hours on Saturday and Sunday when available. Medical Director serivces are contracted through ACH. Dr. is at the facility weekly. There are 20 hours of Mental Health per week contracted through ACH. Discharge planning is remains a focus.

DOC 350.15 (14) Use of health transfer summary form under s. 302.388 (2), Stats.

Wisconsin State Statute 302.388 Prisoner medical records.

(2) HEALTH SUMMARY FORM.

- (a) The department shall provide each jailer a standardized form for recording the medical conditions and history of prisoners being transferred to the department or another county's jail. Except as provided in pars. (b) and (bm), jail medical staff shall complete the form and provide it to the receiving institution intake staff at the time of each such transfer.
- (b) If the jail does not have medical staff on duty at the time of a transfer, the jailer or his or her designee shall complete as much of the form as possible and provide it to the receiving institution intake staff at the time of the transfer. The jailer shall ensure that all of the following occur within 24 hours after the transfer.
 - 1. The jail medical staff, the prisoner's health care provider or, if the prisoner does not have a health care provider, a health care provider under contract with the jail reviews the form provided to the receiving institution at the time of the transfer.
 - 2. The medical staff or health care provider reviewing the form corrects any errors in the form and includes in it any additional available information.
 - 3. The medical staff or health care provider reviewing the form transmits the updated form or the information included on the form by the quickest available means to the receiving institution intake staff.

(bm) Jail medical staff need not complete the form if the jailer or his or her designee provides a copy of the prisoner's complete medical file to the receiving institution intake staff at the time of the transfer.

- (f) Receiving institution intake staff may make a health summary form available to any of the following:
 - 1. The prison's or jail's medical staff.
 - 2. A prisoner's healthcare provider.
 - 3. In the case of a prison or jail that does not have medical staff on duty at the time of the transfer, a health care provider designated by the department or the jailer to review health summary forms.
 - 4. In the case of a jail that does not have medical staff, a person designated by the jailer to maintain prisoner medical records.

| COMPLIANCE | VERIFICATION | | | | |
|--|---|--|--|--|--|
| Meets standard | Policy and procedure manual review Previous compliance documented | | | | |
| Needs improvement | Sample of facility records reviewed Other (specify): | | | | |
| Non-compliant | Sight confirmation by inspector | | | | |
| Not reviewed | Verbal confirmation by facility staff | | | | |
| Comments: Policy and Procedure #105 | .00 Medical and Health Care | | | | |
| Spot review on the date of the inspec | tion showed compliance in this area. Staff report this is working well. | | | | |
| DOC 350.15 (15) Communicable disease and infection control. Policies and procedures relating to communicable disease and infection control shall contain all of the following components: | | | | | |
| (a) Provision of treatment and supervision of inmates during isolation or quarantine under s. 252.06(6)(b), Stats. (b) Documentation of the need for isolation or quarantine under s. 252.06(6)(b), Stats., in the inmate's confidential medical file. (c) Provision of laboratory screening for inmates who may have been exposed to a communicable disease if ordered by medical personnel. (d) Provision for handling bio-hazardous waste and decontaminating medical and dental equipment in accordance with regulations. | | | | | |
| COMPLIANCE | VEDICATION | | | | |

Policy and procedure manual review

Sample of facility records reviewed

Sight confirmation by inspector

Meets standard

Non-compliant

Needs improvement

| DOC 350.15 (16) Detoxification and management of intoxicated inmates. | | | | | | |
|---|---|--|--|--|--|--|
| Appropriate housing and supervision is provided. | | | | | | |
| VERIFICATION | | | | | | |
| Policy and procedure manual review | Previous compliance documented | | | | | |
| Sample of facility records reviewed | Other (specify): | | | | | |
| Sight confirmation by inspector | | | | | | |
| | is provided. VERIFICATION Policy and procedure manual review Sample of facility records reviewed | | | | | |

Previous compliance documented

Other (specify):

| Office | RTMENT OF CORRECTIONS of Detention Facilities 2744 (4/2015) | | | | WISCONSIN | |
|-------------|--|--|---|--------|--|----|
| | Not reviewed | \boxtimes | Verbal confirmation by facility staff | | | |
| Comme | ents: Spot review on the dat | e of the i | nspection showed compliance in th | is ar | ea. | |
| and ad | ministration of prescription an | d non-pre | | | rocedures relating to the control, deliver eatments. | У |
| COMPL | IANCE | VER | IFICATION | | | |
| \boxtimes | Meets standard | | Policy and procedure manual review | | Previous compliance documented | |
| | Needs improvement | \boxtimes | Sample of facility records reviewed | | Other (specify): | |
| | Non-compliant | | Sight confirmation by inspector | | | |
| | Not reviewed | \boxtimes | Verbal confirmation by facility staff | | | |
| Comme | ents: Policy & Procedure # 1 | 105.8 | | | | |
| | 50.16 (2) Designated trained ented training shall be provide | | | es of | medication at prescribed times. Annua | al |
| | LIANCE | VER | IFICATION | | | |
| \boxtimes | Meets standard | | Policy and procedure manual review | | Previous compliance documented | |
| | Needs improvement | \boxtimes | Sample of facility records reviewed | | Other (specify): | |
| | Non-compliant | | Sight confirmation by inspector | | | |
| | Not reviewed | \boxtimes | Verbal confirmation by facility staff | | | |
| Comme | ents: Training was complete | d March | 2018. | | | |
| DOC 35 | ary. | | ersonnel that all medications brought in erformed by a health care provider or an a | | nmates or other persons for an inmate an riately trained designee. | е |
| | IANCE | VER | IFICATION | | | |
| | Meets standard | | Policy and procedure manual review | | Previous compliance documented | |
| | Needs improvement | | Sample of facility records reviewed | | Other (specify): | |
| <u></u> | Non-compliant | | Sight confirmation by inspector | | | |
| | Not reviewed | | Verbal confirmation by facility staff | | | |
| Comme | ents: Policy & Procedure # 1 | 105.9 Spo | ot review on the date of the inspect | ion s | howed compliance in this area. | |
| | 50.16 (5) Any medications kep The storage of inmate medications | t at the jail ions makes eration are l | cept in a separate, medical refrigerator, unl | t that | is not accessible to inmates. | |

COMPLIANCE VERIFICATION Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff

Comments: Spot review on the date of the inspection showed compliance in this area.

| DOC-2744 (4/2015) | | | | | | | |
|--|------------------------------|---|--|--|--|--|--|
| DOC 350.16 (6) Administration or delivery of | f p | rescription and nonprescription medications | to inmates. | | | | |
| Personnel authorized to administer medications are listed in the current policy and procedure manual and accessible to all jail staff. | | | | | | | |
| COMPLIANCE V | /EF | RIFICATION | | | | | |
| Meets standard | | Policy and procedure manual review | Previous compliance documented | | | | |
| Needs improvement | Ī | Sample of facility records reviewed | Other (specify): | | | | |
| Non-compliant | ቨ | Sight confirmation by inspector | , | | | | |
| | $\overline{\boxtimes}$ | Verbal confirmation by facility staff | | | | | |
| Comments: Reviewed with Medical personnel. | | | | | | | |
| Comments. Neviewed with inculcul person | JI 11 | | | | | | |
| DOC 350.16 (7) Medication administered or who administered or delivered the medication DOC 350.16 (8) All refusals of recommended professional shall monitor the inmate in according to the commendation of th | on, d o | and the date and time of administration or de | livery. | | | | |
| All medication documentation is completed. The name of the pharmacist or qualified frequency, the date and time of administration medication. The medication administration and delicompleteness, accuracy, and legibility. | lete ed h istra ive | | comments are documented for each | | | | |
| COMPLIANCE V | /EF | RIFICATION | | | | | |
| Meets standard | | Policy and procedure manual review | Previous compliance documented | | | | |
| Needs improvement | \boxtimes | Sample of facility records reviewed | Other (specify): | | | | |
| Non-compliant | | Sight confirmation by inspector | | | | | |
| Not reviewed | $\overline{\boxtimes}$ | Verbal confirmation by facility staff | | | | | |
| Comments: Medication logs appear to be | - C | omplete in documentation requirements | These logs are reviewed on a | | | | |
| regular basis. Nurses do follow up with | | · | _ | | | | |
| | | | not complete. | | | | |
| DOC 350.16 (9) Return of an inmate's medication inventoried at admission. DOC 350.16 (10) Inventory or disposal of unused medications upon the inmate's release or transfer. The return of an inmate's medication is documented. Unused medication is disposed of by a health care provider, transferred with the inmate, or returned to a pharmacy. Established protocols regarding the disposal of narcotic medications, including witness presence, are followed. Documentation of the disposition of the medication is retained in the inmate's medical file. | | | | | | | |
| COMPLIANCE V | /EF | RIFICATION | | | | | |
| Meets standard | | Policy and procedure manual review | Previous compliance documented | | | | |
| Needs improvement | $\overline{\boxtimes}$ | Sample of facility records reviewed | Other (specify): | | | | |
| Non-compliant [| | Sight confirmation by inspector | · · · · · · · · · · · · · · · · · · · | | | | |
| | \boxtimes | Verbal confirmation by facility staff | | | | | |
| Comments: Spot review on the date of the | ne i | nspection showed compliance in this ar | ea | | | | |
| | | | | | | | |
| | | HIGH RISK SUPERVISION | | | | | |
| DOC 350.17 Suicide prevention. The jail sh may be at risk of seriously injuring themselve | | have policies and procedures relating to the | e supervision and housing of inmates who | | | | |
| COMPLIANCE V | /EF | RIFICATION | | | | | |
| Meets standard | | Policy and procedure manual review | Previous compliance documented | | | | |
| Needs improvement | Ī | Sample of facility records reviewed | Other (specify): | | | | |
| Non-compliant [| | Sight confirmation by inspector | | | | | |
| Not reviewed | $\overline{\boxtimes}$ | Verbal confirmation by facility staff | | | | | |
| Comments: Policy & Procedure # 105.19 | | | | | | | |

| DOC 350.17 (1) Obtaining of suicide or self-harm. | documented information fron | n the arresting or transporting | ng a | gency to assess an inmate's potential for |
|---|--|--|-------------------|--|
| COMPLIANCE | VERIFICATION | | | |
| Meets standard | Policy and | procedure manual review | | Previous compliance documented |
| Needs improvement | | facility records reviewed | | Other (specify): |
| Non-compliant | | rmation by inspector | | , · · · · · (-p/) |
| Not reviewed | | ifirmation by facility staff | | |
| Comments: Arresting/Trans | sporting Officer form is util | zed. Spot review on the | date | of the inspection showed compliance |
| in this area. | permig emeer remine am | zour operionen en me | | er the mopeoner enemed compilation |
| | ning of inmates that includes | interview items and staff obse | ervat | ion related to potential suicide risk. |
| The answers to all scr The screening form is Appropriate follow-up Medical or mental hea A secondary security | erformed on each new inmate. reening questions are document legible, accurate, and complete questions are asked and answe alth care professionals review in review of intake screening report iateness of classification and ris | e, including detailed narratives were recorded, when suicide risk itake screening reports when rists for completeness, accuracy, | is ind k is ir | icated. |
| COMPLIANCE | VERIFICATION | | | |
| Meets standard | Policy and | procedure manual review | | Previous compliance documented |
| Needs improvement | | facility records reviewed | | Other (specify): |
| Non-compliant | _ | rmation by inspector | | , (- p) |
| Not reviewed | | firmation by facility staff | | |
| DOC 350.17 (3) Procedure for an inmate on suicide watch so a) Immediate notification b) Designation of housing | shall include all of the followir to designated supervisory staff g areas and security precaution | suicide watch. Policies and pag components: if an inmate is identified as a sus for inmates who are placed or | oroce uicide | edures relating to the procedure for placing |
| COMPLIANCE | VERIFICATION | | | |
| Meets standard | | procedure manual review | | Previous compliance documented |
| Needs improvement | | facility records reviewed | | Other (specify): |
| Non-compliant | | rmation by inspector | | |
| Not reviewed | Verbal cor | firmation by facility staff | | |
| Comments: Spot review on | the date of the inspection | | is ar | ea. |
| DOC 350.17 (4) Identification | of trained persons who may | assess an inmate's level of s | uicid | e risk. |
| COMPLIANCE | VERIFICATION | | | |
| Meets standard | Policy and | procedure manual review | | Previous compliance documented |
| Needs improvement | Sample of | facility records reviewed | | Other (specify): |
| Non-compliant | Sight conf | rmation by inspector | | |
| Not reviewed | | firmation by facility staff | | |
| Comments: Reviewed with | Jail Administration. | | | |

DOC 350.17 (5) Notification to qualified mental health professionals within 12 hours of placement of a potentially suicidal inmate on suicide watch. Assessment by a qualified mental health professional shall be completed as soon as practicable. Recommendations and decisions from qualified mental health professional are documented and maintained at the jail. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Spot review on the date of the inspection showed compliance in this area. DOC 350.17 (6) Identification of qualified mental health professionals who are authorized to remove an inmate from a suicide watch status after an on-site face-to-face assessment. **COMPLIANCE** VERIFICATION Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Human Serivces personnel are utilized for this need. DOC 350.17 (7) Frequency of communication between health care and jail personnel regarding the status of an inmate who is on suicide watch. A clear and reliable means of communicating information between correctional staff members regarding inmates who are suicide risks All communication between jail staff, administration, and medical/mental health care providers is documented, including names of those involved, summary of content of discussion, and actions taken. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed X Verbal confirmation by facility staff Comments: This is an area currently under review for ongoing improvement between agencies. Forms are utilized and are working well. Ongoing regular meetings are suggested and being scheduled. DOC 350.17 (8) Intervention protocol during an apparent suicide attempt, including life-sustaining measures. Staff demonstrate a working knowledge of first aid and emergency response measures. Staff are familiar with the location and effective use of emergency response equipment. Staff received training on emergency response, including use of emergency response equipment within the past evaluation period. The actions taken in response to a suicide in progress or suicide threat are documented. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Reviewed with staff on the date of the inspection.

| DOC-2744 (4/2015) | | | | |
|---|--|--|--------------------------------|--|
| DOC 350.17 (9) Identification | of persons to be | notified in case of attempted or compl | leted su | iicides. |
| COMPLIANCE | VER | IFICATION | | |
| Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| Needs improvement | | Sample of facility records reviewed | | Other (specify): |
| Non-compliant | | Sight confirmation by inspector | | 2 (-1 7) |
| Not reviewed | | Verbal confirmation by facility staff | | |
| Comments: Reviewed with | lail Administrati | | | |
| DOC 350.17 (10) Documentation | on of actions and | decisions regarding inmates who are | e suicid | e risks, including all of the following: |
| (a) Individual initiating the s (b) Date and time watch wa (c) Reason watch was initia (d) Name of supervisor confector (e) Date and time supervisor (f) Name, date, and time of (g) Written documentation for Supervisory review of | s initiated. ted. tacted. r contacted. referral to mental her | ealth professional. alth professional removing an inmate from mentation is completed. | m a suic | side watch including name, date and time. |
| COMPLIANCE | VER | IFICATION | | |
| Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| Needs improvement | \boxtimes | Sample of facility records reviewed | | Other (specify): |
| Non-compliant | | Sight confirmation by inspector | | |
| Not reviewed | \boxtimes | Verbal confirmation by facility staff | | |
| there were some inconsist some concern with regard compliance. Ongoing initia logs when they have addre DOC 350.17 (11) Implementat | encies within the to adherance to tive is to ensure essed reason for | te documentation. There were are the 15 minute requirement. This is that shift supervisors are review or timeframes that are outside of the state of | eas of s is an ving for the 15 | nents are met on the forms however the forms that were incomplete and area under review to ensure ongoing raccuracy and documenting on the minutes. suicide prevention and identification of risk |
| factors. | | | | |
| COMPLIANCE | VER | IFICATION | | |
| Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| Needs improvement | \boxtimes | Sample of facility records reviewed | | Other (specify): |
| Non-compliant | | Sight confirmation by inspector | | |
| Not reviewed | \boxtimes | Verbal confirmation by facility staff | | |
| Comments: This was comple | eted March 201 | 8 for all Officers. | | |
| DOC 350.17 (12) Access by st | aff to debriefing a | and support services. | | |
| COMPLIANCE | VER | IFICATION | | |
| Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| Needs improvement | Ī | Sample of facility records reviewed | | Other (specify): |
| Non-compliant | Ī | Sight confirmation by inspector | · · · · · · | |
| Not reviewed | \boxtimes | Verbal confirmation by facility staff | | |
| Comments: County peer sup | pport is also ava | | | |

DOC 350.17 (13) Implementation of an operational review following a suicide or significant suicide attempt.

DEPARTMENT OF CORRECTIONS
Office of Detention Facilities

| | of Detention Facilities 744 (4/2015) | | | | |
|-------------------|---|--------------|--|---------------|--|
| COMPL | 1 | /EF | IFICATION | | |
| | Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| | Needs improvement | | Sample of facility records reviewed | | Other (specify): |
| | Non-compliant | | Sight confirmation by inspector | | |
| | Not reviewed | \boxtimes | Verbal confirmation by facility staff | | |
| Comme | nts: Reviewed with Jail Administ | rati | on. | | |
| of an ir policies | nmate in his or her cell or other de and procedures outlining the admir 0.25 (1) An inmate may be placed i | sig nist | nated area to ensure personal safety an rative confinement proces. | d s | ns a non-punitive, segregated confinement ecurity within the jail. The jail shall have attinued presence in the general population |
| (a) (b) | one of the following: Presents a substantial risk of physical has a substantial risk of physical has a pending disciplinary investigation. | jail | | | |
| COMPL | IANCE | /EF | RIFICATION | | |
| \square | Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| | Needs improvement | | Sample of facility records reviewed | | Other (specify): |
| | Non-compliant | | Sight confirmation by inspector | | |
| | Not reviewed | \boxtimes | Verbal confirmation by facility staff | | |
| an inma | ate and the supervisor shall determi sor, a jail staff member may place | ne v an i | whether to place the inmate in administra | ative e st | may require administrative confinement of confinement. In the absence of his or her taff member's supervisor shall review that cation. |
| COMPL | IANCE | /EF | RIFICATION | | |
| | Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| | Needs improvement | | Sample of facility records reviewed | | Other (specify): |
| | Non-compliant | | Sight confirmation by inspector | | |
| | Not reviewed | \boxtimes | Verbal confirmation by facility staff | | |
| Comme | nts: Reviewed with Administration | n. | | | |
| The sup | | nma | te no longer presents a threat to the sat | | supervisor at least once every seven days. security and order of the jail and may be |
| COMPL | IANCE | /EF | RIFICATION | | |
| | Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| | Needs improvement | \boxtimes | Sample of facility records reviewed | | Other (specify): |
| | Non-compliant | | Sight confirmation by inspector | | |
| | Not reviewed | \boxtimes | Verbal confirmation by facility staff | | |
| Comme | nts: Review is done daily. | | | | |
| | strative confinement shall be docume | ente | | | ne length of time the inmate remains in |

WISCONSIN

DEPARTMENT OF CORRECTIONS WISCONSIN Office of Detention Facilities

| | 11 (1/2010) | | | |
|-------------|-------------------|---|--|--|
| COMPLIANCE | | VERIFICATION | | |
| \boxtimes | Meets standard | Policy and procedure manual review Previous compliance documented | | |
| | Needs improvement | Sample of facility records reviewed Other (specify): | | |
| | Non-compliant | Sight confirmation by inspector | | |
| | Not reviewed | Verbal confirmation by facility staff | | |

Comments: Reviewed with Jail administration.

DOC-2744 (4/2015)

| RECORDS AND REPORTING | | | | | | | |
|---|---------------------------------------|--------------------------------|--|--|--|--|--|
| OOC 350.10 Records and reporting. | | | | | | | |
| DOC 350.10 (1) Register of inmates. Each jail shall keep a register of all inmates. The register shall contain identifying information on each inmate, including name, residence, age, sex, race, court order, time and cause of placement and placing authority, and time of release and releasing authority. If an inmate escapes, the time and manner of the escape shall be recorded in the register. | | | | | | | |
| COMPLIANCE | VERIFICATION | | | | | | |
| Meets standard | Policy and procedure manual review | Previous compliance documented | | | | | |
| Needs improvement | Sample of facility records reviewed | Other (specify): | | | | | |
| Non-compliant | Sight confirmation by inspector | | | | | | |
| Not reviewed | Verbal confirmation by facility staff | | | | | | |
| Comments: Policy & Procedure # 103.10 |): | | | | | | |

Records are maintained within the Jail Records Management System (JMS) which is currently Tyler Technologies formerly know as New World. Physical log book is also maintained.

DOC 350.10 (2) Storage of records. Records shall be kept in a secure area. Juvenile records shall be kept separate from adult records and shall be maintained in a confidential manner in accordance with s. 938.396, Stats., and any other applicable federal or state law.

| COMPLIANCE | | VERIFICATION | | | |
|-------------|-------------------|--------------|---------------------------------------|--|--------------------------------|
| \boxtimes | Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| | Needs improvement | | Sample of facility records reviewed | | Other (specify): |
| | Non-compliant | \boxtimes | Sight confirmation by inspector | | |
| | Not reviewed | | Verbal confirmation by facility staff | | |

Comments: Policy & Procedure # 103.24:

All records are kept in a secure area. Juvenile records are maintained separate from adult records.

MAINTENANCE OF JAIL, SANITATION AND CARE OF PRISONERS

Wisconsin State Statute 302.37 Maintenance of jail and care of prisoners.

Wisconsin State Statute 302.37 (1) (a) The sheriff or other keeper of a jail shall constantly keep it clean and in a healthful condition and pay strict attention to the personal cleanliness of the prisoners and shall cause the clothing of each prisoner to be properly laundered. The sheriff or keeper shall furnish each prisoner with clean water, towels and bedding. The sheriff or keeper shall serve each prisoner 3 times daily with enough well-cooked, wholesome food. The county board shall prescribe an adequate diet for the prisoners in the county jail.

Wisconsin State Statute 302.37(3)(a) The county or municipality shall furnish its jail with necessary bedding, clothing, toilet facilities, light and heat for prisoners

Wisconsin State Statute 302.37 (4) The sheriff or other keeper of a jail may use without compensation the labor of any prisoner sentenced to actual confinement in the county jail or, with the prisoner's consent, any other prisoner in the maintaining of and the housekeeping of the jail, including the property on which it stands. Any prisoner who escapes while working on the grounds outside the jail enclosure shall be punished as provided in s. 946.42.

- A daily inspection is conducted by jail staff of housekeeping, sanitation, and physical plant maintenance.
- The jail is constantly clean and in a healthful condition.
- Inmate areas are free of graffiti, posters, wall coverings, etching, etc.
- All surfaces, equipment, and facilities are clean and in good repair.
- Air handling systems, including ventilation screens and covers, are clean, unobstructed, and in good working order.
- Inmate personal property allowed in the housing units is subject to limitations on volume and content.

VEDICIOATION

- Inmates are held accountable for making the beds, cleaning the floors, cleaning the common bathroom facilities, properly storing property, and maintaining cleanliness and order in the housing units daily.
- Inmates and staff are held accountable for housekeeping and sanitation deficiencies.
- Identified maintenance needs are addressed in a timely manner.
- Hallways are free of clutter and obstructions.

COMPLIANCE

| COMPLIANCE | VERIFICATION | | | | | | |
|--|---------------------------------------|--------------------------------|--|--|--|--|--|
| Meets standard | Policy and procedure manual review | Previous compliance documented | | | | | |
| Needs improvement | Sample of facility records reviewed | Other (specify): | | | | | |
| Non-compliantSight confirmation by inspector | | | | | | | |
| Not reviewed | | | | | | | |
| Comments: Policy & Procedure # 106 H | ousekeeping and Sanitation: | | | | | | |
| Staff inspect the facility on a daily basis. The 3 rd shift is responsible for cleaning. Staff are doing a good job of supervising inmates to eliminate excess personal property, improving the housing units. Cleaning supplies are provided 2-3x per week. There are supplies available to wipe tables, etc. within the units for daily cleaning. Inmates are responsible to maintain cell areas in a clean manner or they will not be permitted to watch TV. There appears to be a good working relatioinship with the County Maintenance Department. Maintenance issues are reportedly addressed in a timely manner. Maintenance is able to access maintenance requests daily by accessing the the JMS. DOC 350.12 Sanitation and Hygiene. The jail shall have policies and procedures relating to sanitation and hygiene. DOC 350.12 (1) Facilities are required to be clean and in good repair. | | | | | | | |
| COMPLIANCE | VERIFICATION | | | | | | |
| Meets standard | Policy and procedure manual review | Previous compliance documented | | | | | |
| Needs improvement | Sample of facility records reviewed | Other (specify): | | | | | |
| Non-compliant | Sight confirmation by inspector | | | | | | |
| Not reviewed | Verbal confirmation by facility staff | | | | | | |
| Comments: | | | | | | | |

DOC 350.12 (3) Sheets, pillowcases and mattress covers shall be changed and washed at least weekly and before reissue.

DOC 350.12 (2) Blankets shall be laundered monthly and before reissue.

DOC 350.12 (4) Clean towels shall be issued to each inmate twice a week.

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| OMPLIANCE | VEH | RIFICATION | | |
|---|---|---|------------------|---|
| Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| Needs improvement | | Sample of facility records reviewed | | Other (specify): |
| Non-compliant | | Sight confirmation by inspector | | Guior (oposity). |
| Not reviewed | | Verbal confirmation by facility staff | | |
| | | inspection showed compliance in the | nie ar | 93 |
| all be covered with a fire retardar clean and sanitary condition. The OC 350.12 (6) Suppliers of mattres aterproof, and easy to clean. | nt, waterpro sheriff shal ses and pil | where there is a need for overnight de oof, easy-to-sanitize material. Mattresses Il provide adequate bedding. Mattresses lows shall be provide evidence to the sh | s and s shall | pillows shall be kept in good repair at be cleaned and sanitized before reiss |
| OC 350.12 (7) Mattresses shall be | | | | |
| MPLIANCE Magaza atandard | VEI | RIFICATION Policy and procedure manual review | | Dravious compliance decuments |
| Meets standard | | Policy and procedure manual review | <u> </u> | Previous compliance documented |
| Needs improvement | | Sample of facility records reviewed | | Other (specify): |
| Non-compliant Not reviewed | | Sight confirmation by inspector Verbal confirmation by facility staff | | |
| IC 350 12 (8) The sheriff shall r | arovide an | inmate whose clothing has been confi | scated | I with adequate and appropriate clot |
| | | inmate whose clothing has been confi in custody. Footwear shall be cleaned a | | |
| Huding footwear, for use while the | e inmate is | | | |
| luding footwear, for use while the MPLIANCE | e inmate is | in custody. Footwear shall be cleaned a | | |
| Iuding footwear, for use while the MPLIANCE | e inmate is | in custody. Footwear shall be cleaned a RIFICATION Policy and procedure manual review Sample of facility records reviewed | | nitized before reissue. |
| Iuding footwear, for use while the MPLIANCE Meets standard | e inmate is | in custody. Footwear shall be cleaned a RIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector | | Previous compliance documented |
| MPLIANCE Meets standard Needs improvement | e inmate is | in custody. Footwear shall be cleaned a RIFICATION Policy and procedure manual review Sample of facility records reviewed | | Previous compliance documented |
| DMPLIANCE Meets standard Needs improvement Non-compliant Not reviewed | VEF | in custody. Footwear shall be cleaned a RIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff | | Previous compliance documented |
| DMPLIANCE Meets standard Needs improvement Non-compliant Not reviewed mments: Reviewed with Jail Act | VEF | in custody. Footwear shall be cleaned a RIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff | and sa | Previous compliance documented Other (specify): |
| MPLIANCE Meets standard Needs improvement Non-compliant Not reviewed mments: Reviewed with Jail Act | VEF | in custody. Footwear shall be cleaned a RIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff ion. | and sa | Previous compliance documented Other (specify): |
| MPLIANCE Meets standard Needs improvement Non-compliant Not reviewed mments: Reviewed with Jail Acceptage C 350.12 (9) Laundry schedule seekly. | VEF | in custody. Footwear shall be cleaned a RIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff ion. ablished to meet daily needs. All issued | and sa | Previous compliance documented Other (specify): |
| MPLIANCE Meets standard Needs improvement Non-compliant Not reviewed mments: Reviewed with Jail Act | VEF | in custody. Footwear shall be cleaned a RIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff ion. RIFICATION | and sa | Previous compliance documented Other (specify): |
| MPLIANCE Meets standard Needs improvement Non-compliant Not reviewed mments: Reviewed with Jail Act OC 350.12 (9) Laundry schedule stekly. MPLIANCE Meets standard | VEF | in custody. Footwear shall be cleaned a RIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff ion. ablished to meet daily needs. All issued RIFICATION Policy and procedure manual review | and sa | Previous compliance documented Other (specify): allowed clothing items are laundered to the previous compliance documented |
| DMPLIANCE Meets standard Needs improvement Non-compliant Not reviewed mments: Reviewed with Jail Acceptage OC 350.12 (9) Laundry schedule seekly. DMPLIANCE Meets standard Needs improvement | VEF | in custody. Footwear shall be cleaned a RIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff ion. ablished to meet daily needs. All issued RIFICATION Policy and procedure manual review Sample of facility records reviewed | and sa | Previous compliance documented Other (specify): allowed clothing items are laundered to the previous compliance documented |
| OMPLIANCE Meets standard Needs improvement Non-compliant Not reviewed Omments: Reviewed with Jail Addressed to Meets standard Meets standard | verinmate is VEF | in custody. Footwear shall be cleaned a RIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff ion. RIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff | and sa | Previous compliance documented Other (specify): allowed clothing items are laundered to the previous compliance documented |

DEPARTMENT OF CORRECTIONS WISCONSIN Office of Detention Facilities DOC-2744 (4/2015) **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff

Comments: DOC 350.12 (11) After 24 hours, inmates shall be provided with towels and toilet articles sufficient for the maintenance of cleanliness and hygiene, including toothpaste and toothbrush, soap and comb. Basic feminine hygiene materials for females and toilet paper shall be provided to inmates upon request. There shall be no common use of toothbrushes, combs, shaving materials or feminine hygiene materials. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Reviewed with Jail Administration. DOC 350.12 (12) Inmates are provided cleaning materials daily. Tables used for common use and meals shall be kept sanitized. Door traps used for passing meals or other items shall be kept sanitized. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: Inmates acknowledged compliance in this area. Spray bottles are provided for cleaning following meals etc...as needed.

DOC 350.12 (13) Safety and sanitation inspections of the jail are completed and documented at a minimum of once monthly.

COMPLIANCE

VERIFICATION

Meets standard

Policy and procedure manual review
Previous compliance documented

Needs improvement

Sample of facility records reviewed
Other (specify):

Non-compliant
Sight confirmation by inspector

Not reviewed
Verbal confirmation by facility staff

Comments: Spot review on the date of the inspection showed compliance in this area. Forms have been recently revised and are reportedly working well.

DOC 350.12 (14) Common use grooming tools are disinfected and cleaned before reissue and are stored in a secure area.

COMPLIANCE

VERIFICATION

| DOC 350.12 (14) Common use grooming tools are disinfected and cleaned before reissue and are stored in a secure area. | | | | | | | |
|---|-------------------|---|--|--|--|--|--|
| COMPLIANCE | | VERIFICATION | | | | | |
| \boxtimes | Meets standard | Policy and procedure manual review Previous compliance documented | | | | | |
| | Needs improvement | Sample of facility records reviewed Other (specify): | | | | | |
| | Non-compliant | Sight confirmation by inspector | | | | | |
| | Not reviewed | ∀erbal confirmation by facility staff | | | | | |

Comments:

DOC 350.12 (15) Property storage containers shall be sanitized before reuse.

Property storage containers may include bags, bins, totes and lockers.

DEPARTMENT OF CORRECTIONS
Office of Detention Facilities

WISCONSIN

| DOC-2 | 2744 (4/2015) | | | | |
|-----------|--|--------------|---------------------------------------|--------|--|
| COMPL | IANCE | VERIF | TICATION | | |
| | Meets standard | F | Policy and procedure manual review | | Previous compliance documented |
| | Needs improvement | | Sample of facility records reviewed | | Other (specify): |
| | Non-compliant | | Sight confirmation by inspector | | |
| | Not reviewed | | Verbal confirmation by facility staff | | |
| Comme | ents: Reviewed with Jail Adn | ninistratior | n. Spray is utilized for all areas of | stora | age. |
| DOC 35 | 50.12 (16) Trash is removed da | ily from all | dayrooms. | | |
| COMPL | IANCE | VERIF | TICATION | | |
| \square | Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| | Needs improvement | | Sample of facility records reviewed | | Other (specify): |
| | Non-compliant | | Sight confirmation by inspector | | с илом (оргонуул |
| | Not reviewed | | Verbal confirmation by facility staff | | |
| Comme | ents: Inmate acknowledgeme | ent . | · · · · · · · · · · · · · · · · · · · | | |
| DOC 35 | 50.12 (17) Hazardous waste sha | all be dispo | sed of according to government regul | ations | S. |
| COMPL | | | CICATION | | - |
| | Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| | Needs improvement | | Sample of facility records reviewed | | Other (specify): |
| - H | Non-compliant | | Sight confirmation by inspector | | Other (specify). |
| - H | Not reviewed | | /erbal confirmation by facility staff | | |
| | | | INMATE SERVICES | | |
| | 50.26 Grievance Process. The le to all inmates and includes a | | | to an | inmate grievance process and ensure it is |
| COMPL | IANCE | VERIF | FICATION | | |
| | Meets standard | F | Policy and procedure manual review | | Previous compliance documented |
| | Needs improvement | X 5 | Sample of facility records reviewed | | Other (specify): |
| | Non-compliant | | Sight confirmation by inspector | | |
| | Not reviewed | | /erbal confirmation by facility staff | | |
| Comme | ents: Spot review on the date | e of the ins | spection showed compliance in the | is ar | ea. |
| | 50.27 Legal Access. The jail s aterials. | hall have po | olicies and procedures to address in | nates | access to the courts, their attorneys, and |
| COMPL | LIANCE | VERIF | ICATION | | |
| | Meets standard | F | Policy and procedure manual review | | Previous compliance documented |
| | Needs improvement | | Sample of facility records reviewed | | Other (specify): |
| | Non-compliant | | Sight confirmation by inspector | | \ 1 |
| | Not reviewed | | Verbal confirmation by facility staff | | |
| Comme | ents: Law Library is provided | | e kiosk - Justice Law is the progr | am. | |
| | 2 2. y 2 2. 2. 10.00 | | | - | |

| DOC-2744 (4/2015) | | | | |
|---|------------------------|--|-------------|---|
| DOC 350.28 Indigence. The jail shall have p | oli | cies and procedures to address indigence. | | |
| DOC 350.28 (1) The jail shall establish defin | itio | ns and procedures to define indigence. | | |
| DOC 350.28 (2) Inmates' access to health ca | ıre, | programming and essential services is not | рі | recluded by inability to pay. |
| COMPLIANCE | /EF | RIFICATION | | |
| Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| Needs improvement | | Sample of facility records reviewed | | Other (specify): |
| Non-compliant | | Sight confirmation by inspector | | |
| Not reviewed | $\overline{\boxtimes}$ | Verbal confirmation by facility staff | | |
| Comments: Reviewed with Jail Administr | ati | on. | | |
| DOC 350.29 Mail. The jail shall have polici | | | be | etween inmates and their families, friends, |
| attorneys, the court system, government off | icia | ils and others. | | |
| DOC 350.29 (1) Provision for staff inspection | n a | nd reading of non-privileged incoming and | ou | ıtgoing mail. |
| Staff demonstrate a working knowledg | e o | f the procedures for mail inspection. | | |
| | | | | |
| DOC 350.29 (2) Provision for the limited insp | pec | tion of incoming and outgoing privileged m | nai | l. |
| Staff demonstrate a working knowledg | e o | f the definition of privileged mail and the proced | du | res for inspecting it. |
| COMPLIANCE | /EF | IFICATION | | |
| Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| Needs improvement | | Sample of facility records reviewed | | Other (specify): |
| Non-compliant | \Box | Sight confirmation by inspector | | () |
| Not reviewed | $\overline{\boxtimes}$ | Verbal confirmation by facility staff | | |
| DOC 350.29 (3) Delivery of all non-privileged | | | | |
| Inmate mail is delivered to inmates in a | a tir | nely manner. | | |
| | /ER | RIFICATION | | |
| Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| Needs improvement | | Sample of facility records reviewed | \boxtimes | Other (specify): |
| Non-compliant | | Sight confirmation by inspector | | |
| Not reviewed | \boxtimes | Verbal confirmation by facility staff | | |
| Comments: Inmate verification. | | | | |
| DOC 350.29 (4) Inventory and disposition of Contraband items are inventoried and Contraband is promptly turned over to | dod | cumented. | | |
| COMPLIANCE | /EF | RIFICATION | | |
| Meets standard | П | Policy and procedure manual review | \neg | Previous compliance documented |
| Needs improvement | Ħ | Sample of facility records reviewed | Ħ | Other (specify): |
| Non-compliant | Ħ | Sight confirmation by inspector | _ | - V-1 77 |
| Not reviewed | $\overline{\boxtimes}$ | Verbal confirmation by facility staff | | |
| Comments: Reviewed with Jail Administr | ati | • • | | |

| | | of Detention Facilities 744 (4/2015) | | | | |
|------------------|------------------------------|--|------------------------|--|------|--|
| DO | C 35 | 0.29 (5) Provision of postage to ind | iger | nt inmates. | | |
| CO | MPL | IANCE | VEF | RIFICATION | | |
| | X | Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| Ī | | Needs improvement | $\overline{\boxtimes}$ | Sample of facility records reviewed | | Other (specify): |
| | | Non-compliant | | Sight confirmation by inspector | | _ (1)/ |
| | | Not reviewed | $\overline{\boxtimes}$ | Verbal confirmation by facility staff | | |
| Con | nme | nts: One stamped envelope ever | ry c | ther week for personal mail and un | limi | ted legal mail. |
| DO | C 35 | | | when outgoing or incoming mail is with | | |
| CO | MPL | IANCE | VEF | RIFICATION | | |
| | \overline{X} | Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| | | Needs improvement | | Sample of facility records reviewed | | Other (specify): |
| | | Non-compliant | $\overline{\sqcap}$ | Sight confirmation by inspector | | |
| | | Not reviewed | $\overline{\boxtimes}$ | Verbal confirmation by facility staff | | |
| DO | C 35 | | scł | | | ers. Attorney visits shall be allowed during |
| DO | C 35 | | | or requesting visitation during nonsched | | |
| <u></u> | MDI | | | ccur at times other than scheduled visiting t | imes | |
| | WPL | IANGE | VΓΓ | | | 7 |
| | | Mooto standard | | Dollay and procedure marked review | Г | |
| | 4 | Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| <u></u> | | Needs improvement | | Sample of facility records reviewed | | Other (specify): |
| _ | | Needs improvement Non-compliant | | Sample of facility records reviewed Sight confirmation by inspector | | · · · · · · · · · · · · · · · · · · · |
| [| | Needs improvement Non-compliant Not reviewed | | Sample of facility records reviewed | on. | Other (specify): |
| | nme | Needs improvement Non-compliant Not reviewed nts: Policy & Procedure # 108.02 | | Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff | | Other (specify): Remote visitation via the kiosk is |
| per | nme | Needs improvement Non-compliant Not reviewed nts: Policy & Procedure # 108.02 | | Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff 'isitation now includes video visitation | | Other (specify): Remote visitation via the kiosk is |
| per pos | nme | Needs improvement Non-compliant Not reviewed Ints: Policy & Procedure # 108.02 Ited 7 days per week and at the for visitors. O.30 (3) Documentation of all visits | 2 V faci | Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff 'isitation now includes video visitation lity 4 days per week. All rules are p | rovi | Other (specify): Remote visitation via the kiosk is ded within the jail rule book and |
| pos DO | mme rmitt sted C 35 | Needs improvement Non-compliant Not reviewed nts: Policy & Procedure # 108.02 ted 7 days per week and at the for visitors. 0.30 (3) Documentation of all visits All non-jail staff members who enter the | faci | Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff /isitation now includes video visitation lity 4 days per week. All rules are pough a visitor log or register. ail are documented on the visitor's log or other. | rovi | Other (specify): Remote visitation via the kiosk is ded within the jail rule book and |
| per pos DO | mme rmitt sted C 35 | Needs improvement Non-compliant Not reviewed nts: Policy & Procedure # 108.02 ted 7 days per week and at the for visitors. 0.30 (3) Documentation of all visits All non-jail staff members who enter the standard standa | faci | Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff (isitation now includes video visitation) lity 4 days per week. All rules are pough a visitor log or register. All are documented on the visitor's log or other states. | rovi | Other (specify): Remote visitation via the kiosk is ded within the jail rule book and appropriate register. |
| per pos DO | mme rmitt sted C 35 | Needs improvement Non-compliant Not reviewed Ints: Policy & Procedure # 108.02 Ited 7 days per week and at the for visitors. O.30 (3) Documentation of all visits All non-jail staff members who enter the lance Meets standard | faci | Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff Visitation now includes video visitation lity 4 days per week. All rules are pough a visitor log or register. The pough a visitor log or other visitor's log or other logical procedure manual review | rovi | Other (specify): Remote visitation via the kiosk is ded within the jail rule book and appropriate register. Previous compliance documented |
| per pos DO | mme rmitt sted C 35 | Needs improvement Non-compliant Not reviewed nts: Policy & Procedure # 108.02 ted 7 days per week and at the for visitors. 0.30 (3) Documentation of all visits All non-jail staff members who enter the standard standa | faci | Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff (isitation now includes video visitation) lity 4 days per week. All rules are pough a visitor log or register. All are documented on the visitor's log or other states. | rovi | Other (specify): Remote visitation via the kiosk is ded within the jail rule book and appropriate register. |

Comments: Spot review on the date of the inspection showed compliance in this area.

Meets standard

Non-compliant

Not reviewed

Needs improvement

Previous compliance documented

Other (specify):

Office of Detention Facilities DOC-2744 (4/2015)

and inmates. COMPLIANCE

| DOC-2744 (4/2015) | | |
|--|---|--|
| DOC 350.30 (4) Establishment of a search p | policy of visitors and their possessions. | |
| policies. Law enforcement/Community Correct may be subject to search. | subject to strict guidelines regarding personal ite | ms, carry-in equipment and compliance with jail e correctional practices limiting carry-in items and |
| COMPLIANCE | VERIFICATION | |
| Meets standard | Policy and procedure manual review | Previous compliance documented |
| Needs improvement | Sample of facility records reviewed | Other (specify): |
| Non-compliant | Sight confirmation by inspector | |
| Not reviewed | Verbal confirmation by facility staff | |
| Comments: Reviewed with Jail Administ | tration. | |
| DOC 350.30 (5) Posting of visitation polic | ies and procedures, including visitation sch | edule, in a place readily accessible to visitors |

Policy and procedure manual review

Sample of facility records reviewed

Verbal confirmation by facility staff

Sight confirmation by inspector

Comments: Spot review on the date of the inspection showed compliance in this area.

VERIFICATION

| DOC 350.3 | 80 (6) Establishment of a search | polic | y for inmates before and after each visit. | |
|-----------|----------------------------------|-------------|--|--------------------------------|
| COMPLIAN | NCE | VER | IFICATION | |
| ⊠ I | Meets standard | | Policy and procedure manual review | Previous compliance documented |
| | Needs improvement | | Sample of facility records reviewed | Other (specify): |
| | Non-compliant | | Sight confirmation by inspector | |
| I | Not reviewed | \boxtimes | Verbal confirmation by facility staff | |
| Comments | : Reviewed with Jail Adminis | tratio | on. | |

| DOC service | | The jail | shall have policies and procedures rela | ating | to the provision of inmate programs and |
|--|--------------------------------------|------------------------|--|--|---|
| DOC: | 350.31 (1) Use of community resc | ources, c | contract providers, and volunteers author | rizec | by the sheriff. |
| DOC : | 350.31 (2) Notification to inmates | of availa | ability, eligibility, and schedules. | | |
| DOC | 350.31 (3) Conducting criminal ba | ackgroui | nd checks on all volunteers, community i | reso | urces, and contract providers. |
| DOC: | 350.31 (4) Orientation and training | g on fac | lity operations for all volunteers. | | |
| DOC | | _ | | age | e consistent with the requirements of the |
| COMF | PLIANCE | VEF | RIFICATION | | |
| $\overline{\mathbb{X}}$ | Meets standard | | Policy and procedure manual review | Т | Previous compliance documented |
| | Needs improvement | $\overline{\boxtimes}$ | Sample of facility records reviewed | Ī | Other (specify): |
| | Non-compliant | | Sight confirmation by inspector | | |
| | Not reviewed | \boxtimes | Verbal confirmation by facility staff | | |
| Comn | nents: Spot review on the date | of the i | nspection showed compliance in thi | is ai | rea. Jail Administration has identified |
| prog | ramming as an area for overa | Il reviev | v. | | |
| | | | shall have the opportunity to participated is shall have policies and procedures related in the shall have policies and procedures related in the shall have policies and procedures related in the shall have the opportunity to participate the shall have policies and procedures related to the shall have policies and the shall have policies and the shall have procedured to the shall have been shall have the shall have been shall have bee | | practices of their religious faith consistent to religious programming. |
| DOC | 250 22 (4) Identification of reliais | | sizations and alexan willing to conduct re | linia | us convices in the facility |
| DOC. | 350.32 (1) Identification of religio | us orgar | nizations and clergy willing to conduct re | iigio | ous services in the facility. |
| DOC: | 350.32 (2) Notification to inmates | of the s | chedule of religious services available in | the | jail. |
| | 0. ". | • • • | | | |
| • | Staff demonstrate a knowledge of | of the pro | cedure for assessing and responding to inm | iate | requests for religious services. |
| | PLIANCE | VEF | RIFICATION | | |
| $\underline{\underline{\hspace{0.2cm}}}$ | Meets standard | <u> </u> | Policy and procedure manual review | <u></u> | Previous compliance documented |
| | Needs improvement | <u> </u> | Sample of facility records reviewed | 上 | Other (specify): |
| | Non-compliant | | Sight confirmation by inspector | | |
| | Not reviewed | \boxtimes | Verbal confirmation by facility staff | | |
| Comn | nents: Policy & Procedures # 1 | 08.03, | .04, .05 & .06 | | |
| DOC | 350.32 (3) Identification of religio | us items | that may be kept on an inmate's person | or i | n the cell. |
| | 16 P 2 20 20 20 1 4 | , | | | |
| • | <u> </u> | - | es are consistently applied throughout the ja | II. | |
| | PLIANCE | VEF | RIFICATION | | - |
| | Meets standard | <u> </u> | Policy and procedure manual review | Ļ | Previous compliance documented |
| | Needs improvement | <u> </u> | Sample of facility records reviewed | L | Other (specify): |
| | Non-compliant | | Sight confirmation by inspector | | |
| | Not reviewed | | Verbal confirmation by facility staff | | |
| Comn | nents: Policy & Procedure # 10 | 8.06 | | | |
| | | | | | |
| | | | | | |
| DOC | 350.32 (4) Conducting criminal ba | ckaroui | nd checks on members of a religious org | aniz | ration and clergy. |
| | | | | | |
| | PLIANCE | VEF | RIFICATION | | 7 |
| | Meets standard | <u> </u> | Policy and procedure manual review | <u></u> | Previous compliance documented |
| <u> </u> | Needs improvement | <u> </u> | Sample of facility records reviewed | <u> L </u> | Other (specify): |
| <u> </u> | Non-compliant | | Sight confirmation by inspector | | |
| L | Not reviewed | \boxtimes | Verbal confirmation by facility staff | | |
| Comn | nents: Reviewed with Jail Adm | inistrati | on. | | |

Office of Detention Facilities DOC-2744 (4/2015)

| DOC 250 22 (5) Orientation and training a | n for | ility aparations for all valuntaers | | |
|--|---------------------|--|----------------------------|--|
| DOC 350.32 (5) Orientation and training of | | | | |
| Documentation of the orientation ar | | - | | |
| COMPLIANCE | VE | RIFICATION | | |
| Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| Needs improvement | | Sample of facility records reviewed | | Other (specify): |
| Non-compliant | | Sight confirmation by inspector | | |
| Not reviewed | \succeq | , , | | |
| Comments: This area is in place howe | ver ı | ınder revision to ensure all areas are | bei | ng met. |
| DOC 050 00 Decreation. The initial shall be | | : | | |
| DOC 350.33 Recreation. The jail shall ha | ve po | olicies and procedures relating to recreation | on. | |
| DOC 350.33 (1) Identification of the recrea | ation | al activities that are available. | | |
| DOC 350 33 (2) Sahadula of represtiend | | tion. | | |
| DOC 350.33 (2) Schedule of recreational a | | | | |
| COMPLIANCE | VE | RIFICATION | | |
| Meets standard | | Policy and procedure manual review | <u> </u> | Previous compliance documented |
| Needs improvement | | Sample of facility records reviewed | | Other (specify): |
| Non-compliant | | Sight confirmation by inspector | | |
| Not reviewed | | Verbal confirmation by facility staff | | |
| Comments: Policy & Procedure # 108. | 11 | | | |
| DOO 050 00 (0) W// | | | | |
| DOC 350.33 (3) When and where available | e, at 1 | east one nour of daily exercise and recrea | ation | is outside the cell or outdoors. |
| COMPLIANCE | VE | RIFICATION | | |
| Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| Needs improvement | | Sample of facility records reviewed | | Other (specify): |
| Non-compliant | | Sight confirmation by inspector | | |
| Not reviewed | \boxtimes | Verbal confirmation by facility staff | | |
| Comments: Reviewed with Jail Admini | strat | ion. | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| DOC 350.34 Publications. The jail shall ha | ave n | olicies and procedures relating to access | to n | ublications |
| | - | | - | |
| DOC 350.34 (1) Provision of publications | of ge | eneral interest for inmates such as books, | new | spapers and magazines. |
| DOC 350.34 (2) Identification of publication | ons t | nat are prohibited for inmates because the | eir co | ontent creates a security risk |
| 200 000.04 (2) Idontinoation of publication | J.1.5 t. | iat are promotion for initiated because the | J UC | Them or cated a security flow. |
| Reading material restrictions are po | sted | or otherwise accessible to inmates. | | |
| DOC 350.34 (3) Inspection of publications | s bro | ught by visitors for inmates if the iail allow | vs vi: | sitors to bring in reading materials. |
| | | | | |
| | | rsonal reading materials that can be kept in t | the h | ousing area, and these limitations are |
| enforced consistently throughout the | | ht in by visitors are subject to search. | | |
| COMPLIANCE | | RIFICATION | | |
| | νĽ | | \boxtimes | Provinue compliance documented |
| | | Policy and procedure manual review | $-\frac{\square}{\square}$ | Previous compliance documented |
| Needs improvement Non-compliant | <u> </u> | Sample of facility records reviewed Sight confirmation by inspector | Ш | Other (specify): |
| Not reviewed | $\overline{\nabla}$ | Verbal confirmation by facility staff | | |
| Comments: Reviewed with Jail Admini | otro: | • | | |
| Comments. Neviewed with Jan Admini | อแสโ | ion. | | |
| | _ | | _ | |

| DOC 350.35 Canteen. The jail shall have poservices for inmates. | olicies and procedures for the establishment | and use of canteen, vending or other similar |
|--|--|--|
| DOC 350.35 (1) Canteen shall be made availa | able to eligible inmates. | |
| DOC 350.35 (2) Access to canteen may be re | estricted by the facility based upon inmate cla | ssification or status. |
| COMPLIANCE V | ERIFICATION | |
| Meets standard | Policy and procedure manual review | Previous compliance documented |
| Needs improvement | Sample of facility records reviewed | Other (specify): |
| Non-compliant [| Sight confirmation by inspector | |
| Not reviewed | Verbal confirmation by facility staff | |
| Comments: Policy & Procedure # 108.13 | Turnkey is the current vendor. | |
| | FOOD SERVICE | |
| | FOOD SERVICE | |
| DOC 350.11 Food Service. The jail shall have | e policies and procedures relating to food ser | rvice. |
| | | |
| DOC 350.11 (1) The jail shall provide nutrition | us and quality food for all inmates. | |
| DOC 350.11 (2) An annual menu review by a | qualified nutritionist or dietician shall be com | pleted and maintained in the facility files. |
| COMPLIANCE V | ERIFICATION | |
| Meets standard | Policy and procedure manual review | Previous compliance documented |
| Needs improvement | Sample of facility records reviewed | Other (specify): |
| Non-compliant [| Sight confirmation by inspector | |
| Not reviewed | Verbal confirmation by facility staff | |
| Comments: Policy # 107.00 Food Service | <u>}</u> | |
| • | 3/9/2018 by the Manitowoc County Heal | th Department |
| <u> </u> | • | |
| DOC 350.11 (3) An annual inspection of all for documenting that the food service area meet | ull-production and service kitchens in a jail by | a qualified, independent outside source |
| | • | |
| | ERIFICATION | |
| Meets standard | Policy and procedure manual review | Previous compliance documented |
| | Sample of facility records reviewed | Other (specify): |
| Non-compliant | Sight confirmation by inspector | |
| Not reviewed | ✓ Verbal confirmation by facility staff | |
| Comments: Completed by Manitowoc Co | unty Health Department Sanitarian on 3 | /29/2018. |
| | | |
| DOC 350.11 (4) Internal monthly inspection of | of the food service area is completed and doc | umented. |
| COMPLIANCE V | ERIFICATION | |
| Meets standard | Policy and procedure manual review | Previous compliance documented |
| Needs improvement | Sample of facility records reviewed | Other (specify): |
| Non-compliant | Sight confirmation by inspector | |
| Not reviewed | Verbal confirmation by facility staff | |
| Comments: This is being done internally, | and has been implemented on the secu | rity side for formalization. |
| | · | <u> </u> |
| DOC 350.11 (5) The kitchen area and all equidocumented. | pment are maintained in a sanitary condition. | Routine inspections are completed and |

DEPARTMENT OF CORRECTIONS
Office of Detention Facilities

WISCONSIN

| DOC- | 2744 (4/2015) | | | | |
|-----------|---|-------------------------|---|------|--|
| COMP | LIANCE \ | /ER | IFICATION | | |
| \square | Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| | Needs improvement | | Sample of facility records reviewed | | Other (specify): |
| | Non-compliant | \boxtimes | Sight confirmation by inspector | | |
| | Not reviewed | \boxtimes | Verbal confirmation by facility staff | | |
| Commo | ents: Spot review on the date of th | e i | nspection showed compliance in this | are | ea. |
| | 50.11 (6) Three nutritious meals are y food service demands, provided bas | | | tion | s may be allowed based on weekend and |
| COMP | LIANCE \ | /EF | IFICATION | | |
| | Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| | Needs improvement | X | Sample of facility records reviewed | | Other (specify): |
| | Non-compliant | | Sight confirmation by inspector | | |
| | Not reviewed | \boxtimes | Verbal confirmation by facility staff | | |
| Commo | ents: Spot review on the date of th | e i | nspection showed compliance in this | are | ea. |
| DOC 3 | 50.11 (7) Food temperatures are prop | erl | v maintained. | | |
| : | Documentation of daily food preparation Documentation of periodic serving tem | n t | emperatures is maintained. | | |
| COMP | LIANCE \ | /ER | IFICATION | | |
| | Meets standard | | Policy and procedure manual review | П | Previous compliance documented |
| | Needs improvement | $\overline{\mathbb{X}}$ | Sample of facility records reviewed | Ħ | Other (specify): |
| 一片 | Non-compliant | | Sight confirmation by inspector | | cure. (open, y). |
| | Not reviewed | $\overline{\boxtimes}$ | Verbal confirmation by facility staff | | |
| Commo | ents: Protocols have been under r | evi | ew in this area and are working well. | | |
| | | ite | ms are stored in appropriate locations and | | ened food packages are stored in airtight mperatures. |
| COMP | LIANCE \ | /EF | IFICATION | | |
| | Meets standard | | Policy and procedure manual review | П | Previous compliance documented |
| | Needs improvement | $\overline{\Box}$ | Sample of facility records reviewed | Ħ | Other (specify): |
| | Non-compliant | $\overline{\boxtimes}$ | Sight confirmation by inspector | | Care (cpcon)). |
| | Not reviewed | $\overline{\mathbb{X}}$ | Verbal confirmation by facility staff | | |
| Commo | ents: Spot review on the date of th | e i | nspection showed compliance in this | are | ea. |
| DOC 3 | 50.11 (9) Special diets are provided a | s p | rescribed by a qualified health care profes | sio | nal. |
| • | Documentation of special diet orders is | s m | aintained. | | |
| COMP | LIANCE \ | /EF | IFICATION | | |
| \square | Meets standard | | Policy and procedure manual review | | Previous compliance documented |
| | Needs improvement | \boxtimes | Sample of facility records reviewed | | Other (specify): |
| | Non-compliant | | Sight confirmation by inspector | | |
| | Not reviewed | \boxtimes | Verbal confirmation by facility staff | | |
| Comme | ents: Forms are utilized. Spot review | ew | on the date of the inspection showed | d co | ompliance in this area. |
| | provide a substitute from other availa | | | | onsistent with available resources, the jail The substitutions shall be consistent with |

| pliant wed wed with kitchen man food and drink shall be p andard provement pliant wed | VEF | Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff T. Cted from contamination. Meals are cove RIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff Inspection showed compliance in this | | Previous compliance documented Other (specify): |
|--|--|--|--|--|
| pliant pliant wed wed with kitchen man food and drink shall be p andard provement pliant | age | Sight confirmation by inspector Verbal confirmation by facility staff T. Cted from contamination. Meals are cove RIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector | ered | during transit to and within the facility. Previous compliance documented |
| pliant pliant wed wed with kitchen man food and drink shall be p andard provement pliant | age | Sight confirmation by inspector Verbal confirmation by facility staff T. Cted from contamination. Meals are cove RIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector | ered | during transit to and within the facility. Previous compliance documented |
| nprovement pliant wed wed with kitchen man food and drink shall be p andard approvement | age | Sight confirmation by inspector Verbal confirmation by facility staff T. Cted from contamination. Meals are cove RIFICATION Policy and procedure manual review Sample of facility records reviewed | ered | during transit to and within the facility. Previous compliance documented |
| pliant wed wed with kitchen man | age | Sight confirmation by inspector Verbal confirmation by facility staff r. cted from contamination. Meals are cove RIFICATION Policy and procedure manual review | ered | during transit to and within the facility. |
| nprovement pliant wed wed with kitchen man | age | Sight confirmation by inspector Verbal confirmation by facility staff r. cted from contamination. Meals are covered from contamination. | ered | during transit to and within the facility. |
| nprovement pliant wed wed with kitchen man | age | Sight confirmation by inspector Verbal confirmation by facility staff r. | ered | |
| nprovement pliant wed | | Sight confirmation by inspector Verbal confirmation by facility staff | | Other (specify): |
| nprovement pliant | | Sight confirmation by inspector | | Other (specify): |
| provement | | Sight confirmation by inspector | | Uther (specify): |
| | | Sample of facility records reviewed | | Uther (specify): |
| | | | Ŧ | |
| andard | | Policy and procedure manual review | | Previous compliance documented |
| | VEF | RIFICATION | | |
| | | | tion | and service. |
| | | | ٠, ١٥. | Spot review on the date of the |
| | | · · · · · · · · · · · · · · · · · · · | าทร | Spot review on the date of the |
| wed | | | | |
| • | | · · · · · · · · · · · · · · · · · · · | | J Other (specify). |
| | \Box | • | 누 | Other (specify): |
| andard | V E I | | | Previous compliance documented |
| ation of orientation and tra | | | | |
| nmate workers are provid | ded o | orientation and training prior to assignme | ent ii | n the kitchen area. |
| wed with Kitchen Mar | nage | er. | | |
| wed | \boxtimes | Verbal confirmation by facility staff | | |
| pliant | | Sight confirmation by inspector | | |
| provement | | Sample of facility records reviewed | | Other (specify): |
| andard | | Policy and procedure manual review | | Previous compliance documented |
| | VEF | RIFICATION | | |
| | andard sprovement wed workers are provident and and and are being utilized an ed compliance in this namete workers are super | All persons who work in food times when engaged in the regernails. VER andard Inprovement Inpliant Inwed Inwellige Inwell | In a facility. Ill persons who work in food service areas shall wear clean garments times when engaged in the handling of food, drink, utensils or equip gernails. VERIFICATION Indianat Policy and procedure manual review sample of facility records reviewed pliant Sight confirmation by inspector wed Verbal confirmation by facility staff wed with Kitchen Manager. Indianate workers are provided orientation and training prior to assignmentation of orientation and training is maintained. VERIFICATION Indianat Policy and procedure manual review sample of facility records reviewed pliant Sight confirmation by inspector wed Verbal confirmation by facility staff same being utilized and continue to be under review for revisite ed compliance in this area. Indianate workers are supervised throughout all aspects of food preparation of the procedure of | All persons who work in food service areas shall wear clean garments and times when engaged in the handling of food, drink, utensils or equipment gernails. VERIFICATION Andard Policy and procedure manual review provement Sample of facility records reviewed pliant Sight confirmation by inspector wed Verbal confirmation by facility staff wed with Kitchen Manager. Andard Policy and training prior to assignment in ation of orientation and training is maintained. VERIFICATION Andard Policy and procedure manual review provement Sample of facility records reviewed pliant Sight confirmation by inspector wed Verbal confirmation by facility staff are being utilized and continue to be under review for revisions. ed compliance in this area. Namate workers are supervised throughout all aspects of food preparation VERIFICATION |

DEPARTMENT OF CORRECTIONS WISCONSIN Office of Detention Facilities DOC-2744 (4/2015) **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Spot review on the date of the inspection showed compliance in this area. DOC 350.11 (18) Garbage containers are covered, emptied daily, and are kept clean. **COMPLIANCE VERIFICATION** Policy and procedure manual review Meets standard Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Spot review on the date of the inspection showed compliance in this area. DOC 350.11 (19) Cleaning agents are stored separately from food service items. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Sight confirmation by inspector Non-compliant Verbal confirmation by facility staff Not reviewed Comments: Spot review on the date of the inspection showed compliance in this area. DOC 350.11 (20) A security procedure is in place to control and account for sharps, tools and utensils at all times. Documentation of daily control and inventory is maintained. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented

Sample of facility records reviewed

Verbal confirmation by facility staff Comments: Policy # 103.15 This area is under continual review and improvements have been made regarding consistency and accountability. Spot review on the date of the inspection showed compliance in this area.

Sight confirmation by inspector

Other (specify):

Needs improvement

Non-compliant

Not reviewed